

1                   IN THE UNITED STATES DISTRICT COURT  
2                   FOR THE EASTERN DISTRICT OF TEXAS  
3                   MARSHALL DIVISION

3 CENTOCOR, ET AL                   \* Civil Docket No.  
4                                        \* 2:07-CV-139  
4 VS.                                \* Marshall, Texas  
5                                        \*  
5                                        \* June 25, 2009  
6 ABBOTT LABORATORIES              \* 8:30 A.M.

7                   TRANSCRIPT OF TRIAL PROCEEDINGS  
8                   BEFORE THE HONORABLE JUDGE T. JOHN WARD  
9                   UNITED STATES DISTRICT JUDGE  
9                   AND A JURY

10 APPEARANCES:

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25 transcript produced on CAT system.)

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12 \* \* \* \* \*

13  
14 P R O C E E D I N G S

15  
16 COURT SECURITY OFFICER: All rise.

17 (Jury in.)

18 THE COURT: Please be seated.

19 Good morning, Ladies and Gentlemen.

20 Thank you for being here timely.

21 Good morning, Counsel.

22 You ready to proceed?

23 MR. MASLOWSKI: We are, Your Honor.

24 THE COURT: All right.

25 MR. MALONEY: May it please the Court.

1                   THE COURT: Proceed.

2                   MR. MALONEY: Don't worry; we're not  
3 going to go through every single one of those. I saw  
4 the looks on your faces.

5                   THE COURT: For some reason, that was  
6 going through my mind. I thought my conversation  
7 yesterday fell on deaf ears.

8                   MR. MASLOWSKI: I think we'll see that  
9 those documents, all of those documents, are relevant  
10 here.

11                  DANIEL SLOTTJE, Ph.D., DEFENDANTS' WITNESS, SWORN

12                  CROSS-EXAMINATION

13 BY MR. MASLOWSKI:

14                  Q. Good morning, Dr. Slottje.

15                  A. Good morning.

16                  Q. We met at your deposition a few months back,  
17 correct?

18                  A. Yes.

19                  Q. Now, you are here as a professional witness,  
20 correct?

21                  A. Yes.

22                  Q. You do this for a living?

23                  A. Yes. Partially, yes. I'm also a professor.

24                  Q. You provide testimony and opinions in patent  
25 cases, correct?

1 A. Yes.

2 Q. You provide testimony and opinions in  
3 trademark cases, correct?

4 A. I'm sorry. I didn't hear that.

5 Q. You provide testimony and opinions in  
6 trademark cases, correct?

7 A. Yes.

8 Q. You provide testimony and opinions in  
9 copyright cases, correct?

10 A. Yes.

11 Q. You provide testimony and opinions in trade  
12 secret cases, correct?

13 A. Yes.

14 Q. You provide testimony and opinions in other  
15 types of cases, correct?

16 A. Yes.

17 Q. Have any of your opinions ever been wrong?

18 A. I'm not sure what you mean by that.

19 Q. Have any of your opinions ever been rejected  
20 by a jury?

21 A. Not that I'm aware of.

22 Q. Every single one of your opinions has been  
23 accepted by every single jury you've been in front of?

24 A. As far as I know.

25 Q. Now, this is -- giving testimony and opinions

1 is one of the ways that you make money, correct?

2 A. Yes.

3 Q. Did you make more money last year giving  
4 opinions than teaching?

5 A. Yes.

6 Q. In fact, Dr. Slottje, you're charging \$750 an  
7 hour for your time in this case; isn't that right?

8 A. Yes.

9 Q. Now, Dr. Slottje, you have taken issue with  
10 Dr. Gering's damages analysis, correct?

11 A. Yes.

12 Q. And as part of that, you've taken issue with  
13 Dr. Gering's lost profits analysis, correct?

14 A. Yes.

15 Q. And to sum it up, you think he did it wrong,  
16 correct?

17 A. Yes.

18 Q. And yesterday, you put up a slide where you  
19 identified three reasons why you thought he did it  
20 incorrectly, right?

21 A. Correct.

22 Q. For example, you said that he didn't consider  
23 all of the non-infringing alternatives on the market,  
24 correct?

25 A. Correct.

1           Q.     But he was specifically asked whether he  
2 considered all the non-infringing alternatives, and he  
3 answered that he did.

4                   Do you recall that testimony?

5           A.     Yes.

6           Q.     You also said he didn't consider the fact that  
7 there were differences in products, and they, therefore,  
8 don't compete in the same market segment, correct?

9           A.     Yes.

10          Q.     But Dr. Gering specifically said he did study  
11 the differences in the products as well as  
12 patient/doctor preferences.

13                   Do you recall that?

14          A.     Yes.

15          Q.     And he said he took all of that information  
16 into account in his opinion, correct?

17          A.     Yes.

18          Q.     And you also said he didn't consider market  
19 growth in his analysis, correct?

20          A.     Right.

21          Q.     But he was specifically asked whether he  
22 accounted for the growth in the market, and his answer  
23 was absolutely.

24                   Do you recall that?

25          A.     Yes.

1           Q.     So you're not saying he completely ignored  
2 these issues, are you?

3           A.     No.    I'm saying he did completely ignore those  
4 issues.

5           Q.     You're saying he did not ignore those issues,  
6 correct?

7           A.     I'm saying he did ignore those issues.

8           Q.     So his answers to the questions that we just  
9 went through were not accurate?

10          A.     I don't think so.

11          Q.     Well, let's look at some of those issues.

12                 Dr. Gering did what is called a market share  
13 analysis, correct?

14          A.     Yes.

15          Q.     And yes or no, the market share rule is based  
16 on the simple idea that in the absence of a  
17 non-infringing product, sales of the patented product  
18 would be divided among the remaining products in the  
19 marketplace, according to their market shares.

20                 Yes or no?

21          A.     Yes.

22          Q.     And yes or no, in defining the market, in many  
23 instances, the patent owner, or the infringer, will have  
24 performed its own market analysis, which can often be  
25 very useful information in defining the relevant market.

1           Yes or no?

2       A.    Yes.

3       Q.    And one other criticism of Dr. Gering's lost  
4 profits analysis that you have is that he calculated the  
5 incremental profit margin incorrectly; is that right?

6       A.    Correct.

7       Q.    That analysis involves determining what is a  
8 fixed cost as opposed to a variable cost, correct?

9       A.    Yes.

10      Q.    And you said Dr. Gering overstated it by 5  
11 percent, correct?

12      A.    Yes.

13      Q.    But when Dr. Gering did his analysis to  
14 determine the incremental profit margin, he interviewed  
15 the people closest to the Remicade business, like the  
16 Chief Financial Officer at Centocor, to understand what  
17 would be fixed versus what would be variable, correct?

18      A.    Correct.

19      Q.    And isn't that the way that it is usually  
20 done?

21      A.    I would disagree with that.

22      Q.    I'm going to read you something, Dr. Slottje:  
23 We have seen damages experts estimate what they deem to  
24 be fixed, or some cost, versus what they consider to be  
25 a variable cost. Usually, this estimate is based on

1 interviews with and/or testimony from the key financial  
2 personnel at the infringed company.

3                  Does that ring a bell, Dr. Slottje?

4                  A. Yes.

5                  Q. Do you know what I'm reading from?

6                  A. Yes.

7                  Q. What is this?

8                  A. It's a book that I was the editor of, but many  
9 people contributed to it.

10                Q. I just asked you what it is. Right, it's a  
11 book?

12                A. Yes.

13                Q. And your name is in bold letters on the  
14 bottom, correct?

15                A. Yes.

16                Q. And the title is Economic Damages in  
17 Intellectual Property, correct?

18                A. Correct.

19                Q. And intellectual property includes patents,  
20 correct?

21                A. Yes.

22                Q. And this gold star right here says a hands-on  
23 guide to litigation, correct?

24                A. Yes.

25                Q. And this is a litigation, correct?

1           A.     Correct.

2           Q.     In that book, it says the usual way to figure  
3 out incremental profit margin is to talk to the people  
4 closest to the business, correct?

5           A.     No.   That's not what it says.

6           Q.     Let's go back to it, Dr. Slottje.

7                 Usually, this estimate -- usually, this  
8 estimate is based on interviews with and/or testimony  
9 from the key financial personnel at the infringed  
10 company.

11              Did I read that correctly?

12           A.     Yes, you read that correctly.

13           Q.     And this book was published before you got  
14 involved in this litigation, correct?

15           A.     Yes.

16           Q.     It was published in 2006?

17           A.     Correct.

18           Q.     Dr. Slottje, let's talk about one more of your  
19 slides from yesterday. The only slide with any dollar  
20 figures on it that you showed to the jury regarding your  
21 damage calculation, started that calculation on the date  
22 the lawsuit was filed, correct?

23           A.     Yes.

24           Q.     And April 16th, 2007 was the date the lawsuit  
25 was filed, correct?

1           A. That's my understanding.

2           Q. But the patent issued from the Patent Office  
3 on July 4th, 2006, correct?

4           A. Yes.

5           Q. And you've been in Court the last three days,  
6 correct?

7           A. Correct.

8           Q. And you heard Mr. Scodari from Centocor  
9 testify that he told Abbott on numerous occasions that  
10 they were infringing, before the patent issued, correct?

11          A. I don't recall that precise testimony, but I  
12 don't disagree with you.

13          Q. Did you hear Ms. Lubbert, Abbott's corporate  
14 representative, testify by video that Abbott was given a  
15 copy of the '775 patent application in December 2005,  
16 after it was allowed, and Abbott was told by Centocor  
17 that that application could affect Humira?

18           Do you remember that testimony?

19          A. I recall you discussing that testimony during  
20 the trial, yes.

21          Q. And Ken Dow also testified that he had  
22 discussions with the patent attorney at Abbott, correct?

23          A. Yes.

24          Q. And they discussed issues related to the  
25 infringement of the '775 patent, correct?

1       A. I heard -- I heard Mr. Dow's testimony, yes.

2       Q. Now, if the jury finds that Abbott had notice  
3 of infringement when the patent issued, then the damage  
4 calculation starts on July 4th, 2006, correct?

5       A. I have no opinion on that. I -- I did a  
6 damage calculation for that period, as you know, but I  
7 don't have an opinion on as for -- that's not my job to  
8 do.

9       Q. Well, you're a damages expert, correct?

10      A. Yes.

11      Q. And if it's determined that Abbott had notice  
12 of infringement as of July 4th, 2006, then that's when  
13 the damage calculation starts, correct?

14      A. I was asked to do damage --

15      Q. Yes or no, Dr. Slottje.

16      A. I don't know.

17      Q. Does the damage calculation start when Abbott  
18 has notice of the patent?

19      A. I don't know.

20      Q. So if it turns out -- are you okay?

21                   THE COURT: Get closer to the microphone.

22                   COURTROOM DEPUTY: Right.

23      Q. (By Mr. Maslowski) And if the jury finds that  
24 Abbott had notice of infringement when the patent  
25 issued, if it turns out that that is when the damage

1 calculation starts, then the jury should disregard your  
2 damages number, which starts in April of 2007, correct?

3 A. I did two calculations. I did a calculation  
4 in July of '06, as I talked about, and I did a  
5 calculation in April of '07.

6 Q. But I'm talking about the one you put up on  
7 the slide. That started in April 2007, correct?

8 A. Correct.

9 Q. And, Dr. Slottje, let's start with lost  
10 profits.

11 Now, it isn't Dr. Gering's opinion that  
12 Centocor gets lost profits on all Humira sales since  
13 July 2006, correct?

14 A. Correct.

15 Q. And it is not Dr. Gering's opinion that  
16 Centocor gets lost profits on even half of Humira sales  
17 since July 2006, correct?

18 A. I believe that's correct.

19 Q. And, in fact, it's not even Dr. Gering's  
20 opinion that Centocor gets lost profits on a quarter of  
21 Humira sales since July 2006, correct?

22 A. I would have to look at the number, but I  
23 don't disagree with you. I don't know sitting here.

24 Q. Let's look at the number.

25 MR. MASLOWSKI: Joe, can you put up

1 Gering Slide No. 3, please?

2 Q. (By Mr. Maslowski) Do you recall this slide  
3 from Dr. Gering's testimony?

4 A. Yes.

5 Q. And the large blue section are the Humira  
6 sales that Dr. Gering says Centocor does not get lost  
7 profits for, correct?

8 A. Correct.

9 Q. And the yellow section is another section that  
10 Dr. Gering says Centocor does not get lost profits for  
11 those sales either, correct?

12 A. Which -- which was the second one? I'm sorry.

13 Q. The yellow.

14 A. Correct.

15 Q. And it's only the little gray slice right  
16 there that Dr. Gering says that Centocor gets lost  
17 profits for, correct?

18 A. Correct.

19 Q. And can you tell from looking at that chart  
20 whether that's less than 25 percent of Abbott's overall  
21 sales since July 2006?

22 A. Yes. Now that I see the slide, yes.

23 Q. Now, Dr. Gering, you -- strike that.

24 Dr. Slottje, you agree with Dr. Gering that  
25 Centocor is entitled to lost profits in Crohn's disease

1 up through the launch of a drug called Cimzia on April  
2 22nd, 2008, correct?

3 A. Yes.

4 Q. And you provided a report where you calculated  
5 the amount of profits that Centocor lost in Crohn's  
6 disease from the time the '775 patent issued up until  
7 April 21st, 2008, the day before the product launched,  
8 correct?

9 A. Correct.

10 Q. Dr. Slottje, let's look at your Exhibit 10.1,  
11 if we can. You should have a copy of your report in  
12 front of you.

13 MR. MASLOWSKI: And, Your Honor, his --

14 Q. (By Mr. Maslowski) It's there; it should be  
15 separate.

16 MR. MASLOWSKI: Does he have a copy of  
17 his report?

18 Q. (By Mr. Maslowski) It's in the front of your  
19 binder. Got it?

20 A. Yes.

21 Q. Great.

22 MR. MASLOWSKI: Your Honor, his report is not an  
23 exhibit. It's not preadmitted.

24 Do I have permission to put it up on the  
25 slide or the screen for purposes of cross-examination?

1                   THE COURT: Yes.

2                   MR. MASLOWSKI: Joe, can we put up  
3 Exhibit 10.1 from Dr. Slottje's report, please?

4                   If we can just blow up the left-hand side  
5 of the chart, the lost profits calculation right there.

6                   Q. (By Mr. Maslowski) Now, this is where you  
7 calculated the lost profits that are due to Centocor on  
8 account of Abbott's infringement, correct?

9                   A. Yes.

10                  Q. Now, up until April 21st, 2008, your lost  
11 profits methodology in Crohn's was the same methodology  
12 as Dr. Gering's, correct?

13                  A. Correct.

14                  Q. And the first step in your lost profits  
15 calculation, for example, was to take out Humira sales  
16 in combination with Methotrexate, correct?

17                  A. Correct.

18                  Q. Now, Dr. Slottje, you have criticized  
19 Dr. Gering because he didn't take licensed Humira into  
20 account when he did his lost profits analysis, correct?

21                  A. Yes.

22                  Q. Can you please point us, in your lost profits  
23 calculation, to the exact line where you account for  
24 Humira plus Methotrexate as a non-infringing alternative  
25 in the but-for world?

1       A. You're showing the Crohn's, and it's not in  
2 Crohn's as I discussed yesterday.

3       Q. So Dr. Gering's analysis for Crohn's is not  
4 inaccurate at all to the extent that he didn't take into  
5 account Humira plus Methotrexate as a non-infringing  
6 alternative.

7           Is that your opinion?

8       A. Yes.

9       Q. Now, Dr. Slottje --

10      A. Excuse me. I should make sure that I answer  
11 that completely.

12           Up through April of 2008, and then after April  
13 of 2008, we do disagree, because there are others  
14 available.

15      Q. Well, let's look at that. Let's look at where  
16 you disagree. So let's continue to focus on your lost  
17 profits analysis in Crohn's.

18           Under your assumption in the but-for world, in  
19 2007, 99 percent of bio-naive Crohn's patients would  
20 have used Remicade, if Humira was not available,  
21 correct?

22      A. Up through 2008, yes.

23      Q. Right. So up through April of 2008, 99  
24 percent of patients who had never used a biologic  
25 product before -- if Humira wasn't available, 99 percent

1 of those folks would have taken Remicade, correct?

2 A. They had no other choice. Correct.

3 Q. And that's the way it was on April 21st, 2008,  
4 correct?

5 A. Yes.

6 Q. Then on April 22nd, 2008, Cimzia launches,  
7 correct?

8 A. Yes.

9 Q. And in your lost profits analysis, on the day  
10 Cimzia launches, the very day it launches, 0 percent of  
11 Humira's bio-naive patients would have used Remicade, if  
12 Humira was not available, correct?

13 A. No.

14 Q. Let me ask it a different way.

15 On April 21st, 2008, under your analysis,  
16 there is sufficient data for you to determine that  
17 Centocor would have lost sales on 99 percent of Humira  
18 sales to bio-naive patients, correct?

19 A. On the date prior to the launch?

20 Q. Yes.

21 A. I agree.

22 Q. And then the very next day, after Cimzia  
23 launches, under your analysis, there is insufficient  
24 data for you to make a determination that Centocor's  
25 entitled to anything more than 0 percent of Humira's

1 sales to bio-naive patients, correct?

2 A. That's not how I did the analysis, but I would  
3 agree with the conclusion.

4 Q. What percent of bio-naive patients, in your  
5 analysis, does Centocor get for Remicade sales on April  
6 22nd, 2008?

7 A. I don't know. That's why I didn't give them  
8 any lost profits.

9 Q. So you gave them zero, correct?

10 A. Correct, because I don't know.

11 Q. Now, Dr. Gering has stated that he was able to  
12 analyze the data to determine the amount of lost profits  
13 that Remicade would have had for these diseases,  
14 including Crohn's, correct?

15 A. Yes.

16 Q. Now, let's go back to May 2008, right after  
17 Cimzia launches, and take a look at your lost profits  
18 calculation.

19 Now, the only choices in Crohn's, the day  
20 after Cimzia launches, are Remicade and Cimzia, correct?

21 A. Yes.

22 Q. Did you review market share data in this case,  
23 Dr. Slottje?

24 A. Yes.

25 Q. Do you recall Mr. Bazemore's testimony where

1 he pointed out that Cimzia ended 2008 with a market  
2 share of 2 percent?

3 A. Yes.

4 MR. MASLOWSKI: In fact, let's put up  
5 Mr. Bazemore's slide showing market shares for Crohn's  
6 disease, if we could.

7 Q. (By Mr. Maslowski) So that little black sliver  
8 is Cimzia's market share, correct?

9 A. Yes.

10 Q. At the end of 2008, they had 2.1 percent,  
11 correct?

12 A. Correct.

13 Q. So according to your lost profits analysis,  
14 Remicade did not get one additional sale in Crohn's,  
15 after the launch of the product that's shown in that  
16 little black sliver on that pie chart, correct?

17 A. My opinion is not that they wouldn't. My  
18 opinion is I don't know how much.

19 Q. So why didn't you give Remicade one?

20 A. Because it would be guessing, and I'm not  
21 supposed to do that.

22 Q. You can't tell from looking at market share  
23 data like this, for example, where Remicade is preferred  
24 in the actual marketplace, 75 to 2, that Remicade would  
25 have had just one more sale?

1       A. I'm sure they would have, but I don't know  
2 what happened to those Humira sales. That's the  
3 problem.

4       Q. But you didn't give them one; you didn't give  
5 them one single sale, correct?

6       A. I didn't know how many to give them, so I  
7 didn't give them -- them a reasonable royalty.

8       Q. And the same is true for all of the other  
9 indications that we looked at, correct?

10      A. That's correct.

11      Q. And RA, PSA, AS, psoriasis, you didn't give  
12 one single additional sale of Remicade to Centocor in  
13 the but-for world without infringing Humira on the  
14 market, correct?

15      A. I didn't know how many to give them. I agree  
16 with that.

17      Q. So you didn't even give them one?

18      A. Correct.

19      Q. Now, you were here in the Court when His Honor  
20 stated on the first day, when he was speaking to the  
21 jury, that a valid U.S. patent gives the patent owner  
22 the right, for up to 20 years from the date that the  
23 patent application was filed, to prevent others from  
24 making, using, offering to sell, or selling the patented  
25 invention within the United States.

1                   Do you remember that?

2       A.    Yes.

3       Q.    So it's infringement to make, to use, or to  
4 sell, correct?

5       A.    That's my understanding.

6       Q.    Now, with that in mind, Dr. Slottje, I would  
7 like to focus on your contention that Humira plus  
8 Methotrexate is an allegedly non-infringing alternative  
9 in the but-for world.

10                  Now, the but-for world is not a real world,  
11 correct?

12       A.    Correct.

13       Q.    It's a world that an economist like you may  
14 create to calculate lost profit damages, correct?

15       A.    Correct.

16       Q.    Dr. Slottje, yes or no, may an economist who  
17 is analyzing a lost profit patent damages construct a  
18 but-for world which allows for infringement?

19       A.    No.

20       Q.    So let's focus on one single syringe of Humira  
21 in the but-for world, okay? Just one.

22                  January 1st, 2008, Abbott makes one syringe of  
23 Humira. Do you have that syringe in mind?

24       A.    Yes.

25       Q.    Yes or no, is Abbott's manufacture of that

1 syringe of Humira in the but-for world an infringement?

2 A. I don't know.

3 MS. WIGMORE: Your Honor, I have an  
4 objection.

5 THE COURT: Pardon?

6 MS. WIGMORE: I'm objecting to the extent  
7 he's arguing that licensed sales are not infringed.

8 THE COURT: Overruled.

9 Q. (By Mr. Maslowski) Your answer was you don't  
10 know?

11 A. I don't know.

12 Q. Let's follow that same vial of Humira, the  
13 same syringe of Humira.

14 Abbott is probably going to sell it to a  
15 pharmacy, correct?

16 A. That's one way that it can be distributed,  
17 yes.

18 Q. So when Abbott sells that syringe of Humira to  
19 a pharmacy, is that an act of infringement?

20 A. I don't know.

21 Q. Now, if a patient goes to the pharmacy and  
22 picks up that syringe of Humira, takes it home, injects  
23 themselves, and has never used Methotrexate ever, is  
24 that an infringement of Centocor's patent in the but-for  
25 world?

1       A. If they didn't pay on it, yes, I presume that  
2 is, under the assumptions that we're talking about.

3       Q. So if a syringe of Humira is made by Abbott,  
4 it's sold by Abbott, and it's used by a patient at home  
5 without Methotrexate, that whole use is infringing; is  
6 that right?

7       A. That's my understanding.

8       Q. But it's your opinion that Abbott would have  
9 continued to make and sell Humira for use in combination  
10 with Methotrexate in the but-for world, correct?

11      A. My opinion is -- my understanding is it was  
12 available with Methotrexate; it was licensed, if it was,  
13 that is a non-infringing alternative that needs to be  
14 taken into account.

15      Q. You told me that there can be no infringement  
16 in the but-for world, correct?

17      A. That's my understanding.

18      Q. We just walked through one syringe of Humira  
19 from start to finish, and that was an infringement,  
20 correct?

21      A. You described monotherapy use, and I would  
22 agree.

23      Q. But in your but-for world, it's your opinion  
24 that patients and physicians would have been able to  
25 continue to use Humira as a monotherapy, correct?

1 A. No.

2 Q. Dr. Slottje, can you please turn to your  
3 report on Page 6?

4 MR. MASLOWSKI: We can publish this,  
5 correct, Your Honor?

6 Joe, Dr. Slottje's report, Page 6. Or I  
7 can just read it.

8 Q. (By Mr. Maslowski) Look at the very last  
9 sentence on Page 6.

10 MR. MASLOWSKI: Joe, just go ahead and  
11 take it down.

12 There we go. If you can focus in on the  
13 last paragraph of that page and the beginning of the  
14 next page.

15 Q. (By Mr. Maslowski) Dr. Slottje, are you  
16 looking at the last sentence on Page 6?

17 A. Yes.

18 Q. It says: In a but-for world, Abbott would  
19 have continued to sell Humira for licensed uses, i.e.,  
20 co-administration with Methotrexate, even after issuance  
21 of the '775 patent, correct?

22 A. Yes.

23 Q. The next sentence says: Moreover, physicians  
24 and patients would have been able to continue  
25 prescribing or using Humira for all of these

1 indications, regardless of whether or not their uses  
2 fell under licensed sales of Humira.

3 That's what you wrote, correct?

4 A. Yes. And I agree with that.

5 Q. So you are allowing a syringe of Humira to be  
6 made, to be sold, and to be used by a patient without  
7 Methotrexate, correct?

8 A. No. That's not what I did. What I said is  
9 what a doctor can actually do in reality, but that's not  
10 what I assumed in my but-for world.

11 Q. But you have to create a but-for world that  
12 does not allow infringement, correct?

13 A. And I did.

14 Q. Dr. Slottje, let me read it again.

15 Physicians and patients would have been able  
16 to continue prescribing or using Humira for all of these  
17 indications, regardless -- regardless of whether or not  
18 their uses fell under licensed sales of Humira.

19 You wrote that correct, sir?

20 A. It's true.

21 Q. And it's true, Dr. Slottje, that you never  
22 analyzed a but-for world that doesn't include Humira  
23 plus Methotrexate as a non-infringing alternative,  
24 correct?

25 A. Correct.

1       Q. Now, Dr. Slottje, you say lost profits is  
2 inappropriate here, because there's insufficient data  
3 for you to conclude that Remicade would have lost sales,  
4 correct?

5       A. I don't know how many sales they would have  
6 lost.

7       Q. You say there's insufficient data, correct?

8       A. Right.

9       Q. Do you recall Mr. Bazemore testifying about  
10 the amount of analysis that Centocor does to study the  
11 market?

12      A. Yes.

13      Q. He said they study doctor and patient  
14 prescribing choices in the biologic market, correct?

15      A. Correct.

16      Q. Do you recall seeing a huge amount of data  
17 from Abbott providing similar information?

18      A. Yes.

19      Q. There were studies, correct?

20      A. Correct.

21      Q. Do you recall Dr. Gering testifying that he  
22 analyzed a couple of hundred thousand pages of documents  
23 to support his analysis?

24      A. Yes.

25      Q. In fact, the parties exchanged over 3 million

1 documents in this case that you had access to, correct?

2 A. Correct.

3 Q. And in your report, you actually list out just  
4 the page numbers of the documents that you looked at,  
5 and that alone fills up 49 pages, correct?

6 A. Correct.

7 Q. Now, Dr. Slottje, did you actually look at  
8 those documents?

9 A. I looked at a number of them, yes.

10 Q. Did you study them in detail?

11 A. A number of them, yes.

12 Q. Did you attempt to understand the way doctors  
13 and patients use Remicade?

14 A. Yes.

15 Q. And based on that understanding, for example,  
16 it's your opinion that Centocor's not entitled to lost  
17 profits in RA, correct?

18 A. Correct.

19 Q. And when you performed your lost profits  
20 analysis, was it important to understand the percentage  
21 of times that doctors and patients preferred Humira over  
22 Remicade?

23 A. Yes.

24 Q. And was it important to your analysis to  
25 understand the percentage of times that doctors and

1 patients preferred Remicade over Humira and Enbrel?

2 A. Yes.

3 Q. And that would be first-line use, correct?

4 A. I don't agree with that.

5 Q. You don't agree that -- well, was it  
6 important for you to understand the amount of times  
7 that Remicade was used as a first-line treatment?

8 A. I -- I looked at that, and I didn't recall the  
9 exact percentages, but first -- when you say  
10 first-line --

11 Q. Dr. Slottje --

12 A. I'm sorry.

13 Q. The Judge has informed us of the rules,  
14 correct?

15 A. Yes.

16 Q. And you do this quite often, correct?

17 A. I have testified before.

18 Q. So you just need to answer my questions,  
19 correct?

20 A. Okay. I'm sorry. I was trying to.

21 Q. Now, I took your deposition in this case a  
22 couple of months ago, correct?

23 A. Yes.

24 Q. And I asked you at your deposition whether you  
25 had seen any data that showed that Remicade was used as

1 a first-line biologic in RA, correct?

2 A. Yes.

3 Q. And your answer to that question was you  
4 hadn't seen any data, and you, in fact, said I might be  
5 surprised by that; I'm not saying it doesn't happen, but  
6 I'd be surprised by that.

7 Do you recall that?

8 A. Yes.

9 Q. Dr. Slottje, were you surprised when  
10 Mr. Bazemore put up on the screen on Tuesday data  
11 showing that Remicade is used as a first-line biologic  
12 in RA?

13 A. No.

14 Q. Let's take a quick look at that data.

15 MR. MASLOWSKI: If we can have  
16 Exhibit 251, please.

17 Q. (By Mr. Maslowski) This is one of the studies  
18 that Mr. Bazemore discussed, right?

19 A. Yes.

20 Q. It's one of the studies that you've considered  
21 as part of your opinion, correct?

22 A. Correct.

23 MR. MASLOWSKI: If we can go to Page 21,  
24 please.

25 Q. (By Mr. Maslowski) Do you recall this slide in

1 particular?

2 A. Yes.

3 Q. Mr. Bazemore testified about it on Tuesday,

4 correct?

5 A. Yes.

6 Q. And he pointed out to the jury how this data

7 right here shows that Remicade had first-line use in RA,

8 correct?

9 A. Yes.

10 Q. And it's your opinion in this case that

11 subcutaneous products compete with other subcutaneous

12 products, correct?

13 A. Yes.

14 Q. And Enbrel and Humira are both subcutaneous

15 products, correct?

16 A. Yes.

17 Q. So if subcutaneous products only compete with

18 other subcutaneous products, and Enbrel is not working

19 for me, and that's the first -- the first drug I've ever

20 used, the first biologic, my next choice should be

21 Humira, correct?

22 A. Yes.

23 Q. Dr. Slottje, were you here when Mr. Bazemore

24 explained that this data shows exactly the opposite?

25 A. I don't recall him saying that, but I'm not

1 disagreeing with you.

2 Q. Do you see the large green -- actually, let's  
3 make it a little simpler.

4 MR. MASLOWSKI: Joe, yeah, if you can  
5 blow up the first six bars, please, all the way down to  
6 the words, Enbrel, Remicade, Humira.

7 Q. (By Mr. Maslowski) So we have two bars,  
8 Enbrel; two bars, Remicade; two bars, Humira, correct?

9 MR. MASLOWSKI: Can the jury see the bars  
10 okay?

11 No? Okay. Let's move it.

12 Thank you. And I'll need your help when  
13 we need to use that again.

14 Now the Judge probably can't see.

15 THE COURT: That's all right. It's a  
16 little tight in here.

17 Just continue on.

18 MR. SAYLES: I'll help you back there.

19 MR. MASLOWSKI: I appreciate that.

20 Q. (By Mr. Maslowski) So you indicated that if I  
21 was using Enbrel, and in your opinion, subcutaneous  
22 products only compete with other subcutaneous products,  
23 then my second choice is going to be Humira, correct?

24 A. Correct.

25 Q. This data, however, shows completely the

1 opposite here, doesn't it?

2 It shows that Remicade gets first-line use.

3 Some patients right out of the box for RA, they want to  
4 use Remicade.

5 Is that what this data shows?

6 A. Yes.

7 Q. And it also shows that Remicade gets what's  
8 called second-line use, correct?

9 A. Yes.

10 Q. And second-line use means I've either used  
11 Enbrel or I've used Humira, one of the subcutaneous  
12 products; I failed that product, or for some reason I  
13 want to switch off that product.

14 And my second choice was not a subcutaneous  
15 product; it was Remicade, right?

16 A. I don't disagree with that.

17 Q. That's what that data shows, correct?

18 A. It's more complicated than that, but I don't  
19 disagree with that.

20 Q. And this is the type of data you did not  
21 recall seeing at your deposition when I took it two  
22 months ago, because it shows first-line use by Remicade,  
23 correct?

24 A. I don't recall seeing it, yes, that's true.

25 Q. Now, there haven't been any Abbott marketing

1 employees that have come into this Court to tell the  
2 jury that Mr. Bazemore was wrong, correct?

3 A. I don't recall of that happening, no.

4 Q. Well, there haven't been any marketing folks  
5 that have sat in the seat that you're in right now and,  
6 for example, explained how Mr. Bazemore's scorecard of  
7 all the competitors was incorrect, right?

8 A. I agree with most of what Mr. Bazemore said.

9 Q. And there's been no Abbott folks that have  
10 come in and explained how Mr. Bazemore's pie charts were  
11 wrong, correct?

12 A. I don't think so.

13 Q. Well, since we haven't had the chance to hear  
14 from any Abbott marketing folks on this, let's take a  
15 look at Abbott's documents to see who Abbott says it  
16 competes with.

17 Now, Dr. Slottje, it's your opinion that  
18 Remicade and Humira don't compete, since they are not  
19 substantially product -- substantially similar products  
20 in the same market segments, correct?

21 A. That's not my opinion.

22 Q. That's not your opinion?

23 A. No.

24 Q. What is your opinion with respect to  
25 substantially similar products in the same market

1 segments?

2                   Are Remicade and Humira substantially similar  
3 products that compete in the same market segment?

4         A. It depends.

5         Q. And how does it depend?

6         A. It depends on what indication you're talking  
7 about.

8         Q. Let's talk about RA. In RA, are Remicade and  
9 Humira substantially similar products that compete in  
10 the same market segments?

11        A. I don't believe so.

12        Q. And this is RA data, right?

13        A. This doesn't say that, but I'll take your word  
14 for it.

15                   MR. MASLOWSKI: Can we go back to the  
16 first page just so we can be sure? All the way back to  
17 the first page.

18         Q. (By Mr. Maslowski) Remicade, rheumatoid  
19 arthritis performance tracking, correct?

20        A. Correct.

21         Q. Now, Dr. Slottje, by saying that they're not  
22 substantially similar products, you're basically saying  
23 that they're viewed as different, correct?

24        A. I didn't hear the question. One more time,  
25 please.

1 Q. Sure.

2 By saying that they are not substantially  
3 similar products, you're basically saying that they're  
4 viewed as different, correct?

5 A. The second time I didn't catch their what is  
6 different?

7 Q. Sure.

8 By saying they're not substantially similar  
9 products, you're saying they're different, such as they  
10 don't compete, correct?

11 A. I'm saying that they have differences in the  
12 eyes of consumers, and I think that's right.

13 Q. Let's take a look and see what Abbott has to  
14 say about whether or not Humira and Remicade are viewed  
15 as different.

16 MR. MASLOWSKI: Can we have PX216,  
17 please? If you can blow up the top.

18 Q. (By Mr. Maslowski) PX216 is an e-mail dated  
19 May 7th, 2007, correct?

20 A. Correct.

21 MR. MASLOWSKI: If we can go to the  
22 attachment. I think it's two pages, three pages back.  
23 Right there.

24 Q. (By Mr. Maslowski) So attached to the e-mail  
25 is a 2007 strategic plan, Humira, rheumatology, correct?

1 A. Correct.

2 Q. And RA is in rheumatology, correct?

3 A. Correct.

4 MR. MASLOWSKI: If we can turn to the  
5 page ending in 903.

6 And if we can blow up the middle -- the  
7 title, Humira's Strengths, Weaknesses, Opportunities,  
8 Threats.

9 Q. (By Mr. Maslowski) Do you see that section in  
10 the document?

11 A. Yes.

12 MR. MASLOWSKI: Now, if we can blow up  
13 the second paragraph underneath that section, please.

14 Q. (By Mr. Maslowski) Do you see that section?  
15 The first sentence says: Humira's biggest weakness is  
16 the rheums' perception that there is no difference among  
17 the biologics.

18 Did I read that correctly?

19 A. Yes.

20 Q. Let's look at the tactical plan for 2007,  
21 which is also included in this document.

22 MR. MASLOWSKI: Can you please turn to  
23 the page ending in 924?

24 Q. (By Mr. Maslowski) Do you see at the top,  
25 2007, Rheumatology Tactical Marketing Plan?

1 A. Yes.

2 MR. MASLOWSKI: And if we can blow up  
3 underneath that.

4 Keep going. One more bullet point.

5 There we go.

6 Q. (By Mr. Maslowski) So it says: 2007 will be a  
7 very critical year for Humira. An additional \$250  
8 million in sales in rheumatology indications is  
9 expected. This growth is challenged by a number of  
10 issues.

11 Let's look at the third bullet point.

12 Differentiation among the TNF therapies  
13 continues to be non-existent, especially within RA.

14 Did I read that correctly?

15 A. Yes.

16 Q. Dr. Slottje, let's cut to the chase.

17 Remicade is a competitor of Humira in every  
18 indication that we've been talking about here in this  
19 courtroom; isn't that right?

20 A. I don't agree with that.

21 Q. Dr. Slottje, Remicade is a main competitor of  
22 Humira, isn't it?

23 A. It is absolutely a main competitor of Humira,  
24 but I don't agree in every market segment that that's  
25 true.

1 Q. And you don't agree that they're main  
2 competitors, for example, in RA, correct?

3 A. Correct.

4 MR. MASLOWSKI: Joe, can we please have  
5 Exhibit 577?

6 Can you just blow up the slide for us  
7 there?

8 Q. (By Mr. Maslowski) It says: Humira's  
9 Strategic Plan 2007-Overview, correct?

10 A. Correct.

11 Q. And it says: Overview for J. Tyree, correct?

12 A. Correct.

13 Q. That is Jim Tyree, the Executive Vice  
14 President of Pharmaceuticals at Abbott, correct?

15 A. Correct.

16 Q. Date of the document is November 2006,  
17 correct?

18 A. Yes.

19 Q. After the '775 patent issues?

20 A. Correct.

21 MR. MASLOWSKI: Can we please turn to the  
22 page with the last three numbers, 777?

23 Q. (By Mr. Maslowski) Title of the slide:  
24 Humira's Competitors Today, correct?

25 A. Yes.

1           Q.     What indications is Humira approved for at the  
2 time this slide was created as shown by the chart on the  
3 right?

4           A.     RA, AS, PsA.

5           Q.     That's all of the rheumatology indications,  
6 correct?

7           A.     Yes.

8           Q.     Now, let's focus on the first bullet point,  
9 Dr. Slottje. Actually, let's be clear.

10           This is an Abbott document, correct? This is  
11 not a Centocor document?

12           A.     Correct.

13           Q.     The first bullet point says: Main biologic  
14 competitors today both are TNF blockers, correct?

15           A.     Correct.

16           Q.     And Remicade is one of the two main biologic  
17 competitors identified, correct?

18           A.     Correct.

19           MR. MASLOWSKI: Can we have Exhibit 294,  
20 please?

21           Q.     (By Mr. Maslowski) Here's another  
22 presentation, Dr. Slottje, this is from Scott Luce,  
23 Divisional Vice President in Immunology, correct?

24           A.     Correct.

25           Q.     Dated October 2007, correct?

1 A. Yes.

2 MR. MASLOWSKI: Let's turn to Page 13 of  
3 the exhibit, please.

4 If you can blow it up a little bit.

5 Q. (By Mr. Maslowski) At the top, it says:  
6 Competitive Market, correct?

7 A. Correct.

8 Q. This actually looks a little bit similar to  
9 Mr. Bazemore's chart, doesn't it?

10 A list of different products, a list of  
11 different areas: Rheumatology, dermatology,  
12 gastroenterology, correct?

13 A. Correct.

14 Q. Now, under competitive market, Dr. Slottje, in  
15 rheumatology, it lists Remicade as a competitor,  
16 correct?

17 A. Yes.

18 Q. And under dermatology, it lists Remicade as a  
19 competitor, correct?

20 A. Correct.

21 Q. And under gastroenterology, it lists Remicade  
22 as a competitor, correct?

23 A. Yes.

24 Q. Yes or no, Dr. Slottje, Humira has gained  
25 market share since 2006 in the indications it is

1 approved for?

2 A. I believe that's correct.

3 Q. And when Humira took market share, it took it  
4 directly from its main competitor, Remicade; isn't that  
5 right?

6 A. I disagree with that.

7 Q. Let's see what Abbott has to say about where  
8 its market share came from.

9 MR. MASLOWSKI: Can we have PX107,  
10 please?

11 Q. (By Mr. Maslowski) It's another presentation a  
12 little bit hard to read.

13 It says: Working together we can make a  
14 difference.

15 Underneath it says -- it's from Cheryl  
16 Lubbert, Divisional Vice President at Abbott.

17 MR. MASLOWSKI: There we go. We can  
18 actually see that.

19 Q. (By Mr. Maslowski) Can you see that,  
20 Dr. Slottje?

21 A. I can't read it, but I believe you.

22 Q. It says: Cheryl Lubbert, Divisional Vice  
23 President, Immunology, and the date is April 2008,  
24 correct?

25 A. I assume it's correct, yes.

1                   MR. MASLOWSKI: Could we turn to the page  
2 ending in 740, please?

3                   If you can blow up the whole slide with  
4 the notes.

5       Q. (By Mr. Maslowski) The slide is titled:  
6 Immunology: Biologic Market Share Overall Competitive  
7 TRx Share.

8                   Did I read that correctly?

9       A. Yes.

10     Q. And the biologic market includes rheumatology,  
11 dermatology, gastroenterology, correct?

12     A. Correct.

13     Q. And just so the jury knows, TRx stands for  
14 total prescription share, correct?

15     A. TRx stands for prescriptions.

16     Q. Total prescriptions, the T is total?

17     A. Yes.

18     Q. Do you see the note section under this slide?

19     A. Yes.

20                  MR. MASLOWSKI: Can we focus on the last  
21 sentence in the notes, please?

22     Q. (By Mr. Maslowski) It states: We continue to  
23 take share from Remicade, which I like to see, but we  
24 need to bust the Enbrel stranglehold, correct?

25     A. That's what it says.

1 Q. It doesn't say we continue to take market  
2 share by growing the market, does it?

3 A. It says what it says.

4 Q. It doesn't say we continue to take market  
5 share by growing the market, does it?

6 A. No.

7 Q. And it doesn't say we continue to take share  
8 from Enbrel, correct?

9 A. No.

10 Q. It says we continue to take share from  
11 Remicade, which Ms. Lubbert liked to see, correct?

12 A. Yes.

13 Q. Now, Dr. Slottje, when we looked at your book  
14 this morning, the book said that in defining a market  
15 for the lost profits analysis, the infringer will have  
16 performed its own market analysis, which can often be  
17 very useful information in defining the relevant market,  
18 correct?

19 A. Yes.

20 Q. And all the Abbott documents we just looked at  
21 identified Remicade and Humira as competitors, correct?

22 A. Yes.

23 Q. In fact, at least one of them identified  
24 Remicade as one of two main competitors, correct?

25 A. Yes.

1           Q. Now, let's look at some more of what your book  
2 calls very useful information to determine the proper  
3 market.

4           Do you see those two huge binders that are  
5 next to you there, sir?

6           A. Yes.

7           Q. If you could just open up the first one, the  
8 one that is marked probably Volume 1 and take a look at  
9 the first document that's in there.

10          A. It's Volume 2.

11          Q. Why don't you look -- we can look at Volume 2;  
12 we can look at Volume 1; we can look at whatever you  
13 want to look at.

14          Why don't you look at Volume 2, since that's  
15 the one you have.

16          A. Okay.

17          Q. Actually, no, I'm ready to put up Volume 1, so  
18 why don't we go to Volume 1. But we can look at  
19 whatever you want to look at.

20          Actually, let's go back to Volume 2. You're  
21 in charge. Let's go back to Volume 2. We'll go back to  
22 Volume 2.

23          Go ahead; open it up.

24          Do you have Volume 2 or Volume 1?

25          A. Whichever you want me to look at.

1 Q. Well, Dr. Slottje, let me explain to you first  
2 what are in those binders.

3 I went through and collected every single  
4 Abbott market research monthly report that I could find  
5 from June 2006 through the end of 2008, and I put them  
6 all into those binders in date order.

7 Do you want to look through to confirm that,  
8 or will you take my word for it?

9 A. I'll take your word for it.

10 Q. And you've seen those Abbott market research  
11 monthly reports before, correct?

12 A. Yes.

13 Q. And the reports are used to gauge performance  
14 at Abbott, correct?

15 A. I'm sure that's one use of them, yes.

16 Q. Well, let's bring up one of the market  
17 research monthly reports.

18 MR. MASLOWSKI: Let's go to PX630.  
19 If we can blow up the slide.

20 Q. (By Mr. Maslowski) So this is a market  
21 research monthly report, correct?

22 A. Yes.

23 Q. June 2006, which is right before the '775  
24 patent issued, correct?

25 A. Correct.

1 MR. MASLOWSKI: Let's go to Page 3.

2 Q. (By Mr. Maslowski) Do you see the table of  
3 contents?

4 A. Yes.

5 Q. It identifies biologic market, rheumatology  
6 market, dermatology market, gastroenterology market,  
7 correct?

8 A. Yes.

9 MR. MASLOWSKI: Can we go to the page  
10 ending in 337, please?

11 Q. (By Mr. Maslowski) Here is where they show the  
12 overall biologic market, correct?

13 The slide says: BDMARD, Overall Market Share.

14 Do you see that?

15 A. Yes.

16 Q. And BDMARD means biologic DMARD, the  
17 biologics, correct?

18 A. Correct.

19 Q. Dr. Slottje, do you see at the bottom where  
20 they identified the products that they're looking at?

21 A. Yes.

22 Q. It's Humira, Enbrel, Kineret, Remicade,  
23 correct? And then some others?

24 A. Yes.

25 MR. MASLOWSKI: If we can go to page --

1 the page ending in 350.

2 If you can blow it up.

3 Q. (By Mr. Maslowski) This is where the Abbott  
4 market research monthly report is looking at the  
5 rheumatology market share, correct?

6 A. Yes.

7 Q. And at the bottom, it lists the products that  
8 they're analyzing, correct?

9 A. Yes.

10 Q. Humira, Enbrel, Kineret, Remicade, correct?

11 A. With others, yes.

12 MR. MASLOWSKI: If we can go to the slide  
13 ending in 374.

14 Q. (By Mr. Maslowski) This is the  
15 gastroenterology market, correct?

16 A. Yes.

17 Q. And the products identified are Humira,  
18 Enbrel, Remicade, correct?

19 A. Yes.

20 Q. Now, in June 2006, Remicade wasn't approved in  
21 dermatology yet, correct?

22 A. I believe that's correct.

23 Q. So let's jump ahead a year or so and see how  
24 Abbott is looking at all of these markets as well as the  
25 dermatology market.

1                   MR. MASLOWSKI: Can we have PX579,  
2 please?

3                   Blow it up.

4           Q. (By Mr. Maslowski) Same market research  
5 monthly report, correct?

6           A. It's a different report, but it's the same  
7 thing, yes.

8           Q. Same format, different timeframe, correct?

9           A. Correct.

10          Q. One year later?

11          A. Yes.

12                   MR. MASLOWSKI: Let's go to the page  
13 ending in 276, please.

14          Q. (By Mr. Maslowski) Overall biologic market  
15 again, correct, Dr. Slottje?

16          A. Yes.

17          Q. Products at the bottom again. Remicade is  
18 there, correct?

19          A. Correct.

20                   MR. MASLOWSKI: Let's go to the page  
21 ending in 283.

22          Q. (By Mr. Maslowski) Rheumatology market,  
23 Remicade again identified on the chart, correct?

24          A. Correct.

25                   MR. MASLOWSKI: Let's go to the page

1 ending in 290.

2 Q. (By Mr. Maslowski) Dermatology market this  
3 time, correct?

4 A. Yes.

5 Q. Remicade identified again, correct?

6 A. Yes.

7 MR. MASLOWSKI: Let's go to the page  
8 ending in 297.

9 Q. (By Mr. Maslowski) This time the gastro  
10 market; again Remicade identified on the chart, correct?

11 A. Correct.

12 Q. Dr. Slottje, I will represent to you that  
13 every single one of those reports that are in those  
14 binders compares Humira's performance to Remicade's in  
15 the biologic market, the gastro market, the rheumatology  
16 market, and after late 2006, when Remicade was approved  
17 in dermatology, it compares it in dermatology as well.

18 Are you willing to take my word for that, or  
19 would you like to look at another one?

20 A. I'll take your word for it.

21 Q. So, sir, are you really asking the jury to  
22 believe that Remicade and Humira do not compete  
23 head-to-head in the same market in every single  
24 indication, when month after month after month Abbott  
25 looks at the biologic market, the gastro market, the

1 dermatology market, the rheumatology market, and  
2 includes Remicade as a competitor every single time?

3 A. Is there a question? I'm sorry.

4 Q. I was asking you -- we can move on, sir. I  
5 don't think we need to talk about those documents  
6 anymore.

7 Let's move to your reasonable royalty  
8 analysis.

9 Before we get started, let's talk briefly  
10 about your opinion that there should be separate  
11 royalties in the U.S. versus outside the U.S.

12 That's your opinion, correct?

13 A. Yes.

14 Q. Do you know if Centocor has patents covering  
15 anti-TNF-alpha antibodies outside the United States?

16 A. I know I've looked at that. I don't recall it  
17 sitting here.

18 Q. So did you analyze whether Humira would  
19 infringe those Centocor patents outside of the United  
20 States, if it moved its manufacturing outside of the  
21 United States?

22 A. I did look at that.

23 Q. You did?

24 A. Yes.

25 Q. And did you determine that Abbott would not

1 infringe any of Centocor's patents outside of the United  
2 States by moving its manufacturing facilities outside  
3 the United States?

4 A. Well, I didn't assume that, because I still  
5 assume they would be paying a royalty on sales outside  
6 the U.S.

7 Q. You didn't do that analysis, correct, sir?

8 A. I did do it. That's why I took into  
9 account -- you're talking about a royalty for sales  
10 outside the United States.

11 Q. You took into account -- you looked at all of  
12 Centocor's patents and determined that Abbott would not  
13 infringe by moving its manufacturing facilities outside  
14 the United States.

15 Is that what you're telling me?

16 A. No. I'm telling you that I understood that  
17 they sold outside the U.S. and that if they did,  
18 obviously they would have to pay royalties on those  
19 sales under certain conditions, and one of which would  
20 be you just described.

21 Q. Yes or no, sir, did you look at all of  
22 Centocor's patents and separately determine that Abbott  
23 would not infringe every single one of those patents  
24 outside the United States?

25 Yes or no?

1       A. I don't recall the precise analysis that was  
2 done.

3       Q. Did you do it or not, yes or no?

4       A. I took it into account. I've already said  
5 that.

6       Q. Did you do the analysis by looking at every  
7 single Centocor patent outside the United States in  
8 determining if Abbott would infringe?

9                  Yes or no?

10      A. I don't know.

11      Q. Now, Dr. Slottje, the hypothetical negotiation  
12 between Centocor and Abbott relates to one of Centocor's  
13 issued patents, correct?

14      A. Yes.

15      Q. And it's a United States patent, correct?

16      A. Yes.

17      Q. And when Centocor and Abbott sat down for the  
18 hypothetical negotiation, the parties assume that  
19 Centocor's patent is valid, enforceable, and infringed,  
20 correct?

21      A. That's my understanding.

22      Q. All other things being equal, wouldn't the  
23 royalty rate in a negotiation where the patent must be  
24 assumed to be infringed, valid, and enforceable,  
25 wouldn't that be higher than a similar negotiation where

1 that assumption does not have to be made?

2 A. I don't agree with that.

3 Q. You don't agree that it's likely that that  
4 rate would be a little bit higher than a negotiation  
5 where the patent must be assumed to be infringed, as  
6 opposed in one where it doesn't need to be assumed it's  
7 infringed?

8 A. No.

9 Q. Now, when Centocor and Abbott sat down for the  
10 hypothetical negotiation, it was clear to both parties  
11 that they were competitors, correct?

12 A. Yes.

13 Q. And if the parties in a negotiation compete,  
14 then the rate will likely be higher, correct?

15 A. Yes.

16 MR. MASLOWSKI: And actually, if I can  
17 have Mr. Sayles' help again.

18 Q. (By Mr. Maslowski) Keep track of what we're  
19 talking about. This is Centocor, Abbott, hypo, and you  
20 said there's one U.S. patent, correct?

21 A. Yes.

22 Q. And you said the parties were competitors,  
23 correct?

24 A. Yes.

25 Q. And you said that would likely drive the rate

1 up, correct?

2 A. Everything else equal.

3 Q. And at the time of the hypothetical  
4 negotiation, Humira was launched, correct?

5 A. Yes.

6 Q. And that would likely drive the rate up,  
7 correct?

8 A. I don't agree with that.

9 Q. Dr. Slottje, can you please turn to your  
10 deposition at Page 289.

11 A. Okay.

12 Q. And launched means that the product is --  
13 before we get to your deposition, launched means the  
14 product's out of development, right? It's actually  
15 launched.

16 A. Okay.

17 Q. Do you agree with that?

18 A. Yes.

19 Q. Please turn to Page 289, Line 4.

20 QUESTION: The further along in the  
21 development process the technology -- the further along  
22 in the development process the technology is, the higher  
23 the rate is likely to be, correct?

24 ANSWER: Correct.

25 Did I ask you that question, and did you give

1 me that answer at your deposition?

2 A. And I agree with it.

3 Q. And so if the product actually launched, it's  
4 at end of the development process, correct?

5 A. That's a different question than this one.

6 Q. Dr. Slottje, that's a different question?

7 A. Yes.

8 Q. Is the rate likely going to be higher if the  
9 product is at the end of development as compared to the  
10 beginning of development?

11 A. Yes.

12 Q. And when Centocor and Abbott sat down for the  
13 hypothetical negotiation, Humira was a commercially  
14 successful product in the market, correct?

15 A. Correct.

16 Q. And the more commercially successful the  
17 product is that is subject to the hypothetical  
18 negotiation, the higher the rate is likely to be,  
19 correct?

20 A. I would agree with that.

21 Q. And when Centocor and Abbott sat down for the  
22 hypothetical negotiation, Abbott had absolutely no way  
23 to design around Centocor's patent, correct?

24 A. I believe I assumed no design-around, that's  
25 correct.

1 Q. Did Abbott have a design-around at the time of  
2 the hypothetical negotiation?

3 A. I don't believe so.

4 Q. Yes or no?

5 A. I think I said no.

6 Q. And if there's no design-around available,  
7 then the agreed upon royalty rate in the hypothetical  
8 negotiation is going to be higher, correct?

9 A. Again, everything else equal, I would agree  
10 with that.

11 Q. Dr. Slottje, all of these circumstances --

12 MR. MASLOWSKI: I'm sorry. Is it okay if  
13 I move a little bit out here?

14 THE COURT: That's all right.

15 MR. MASLOWSKI: My heart just stopped.

16 THE COURT: Just keep moving. That's --

17 MR. MASLOWSKI: Okay.

18 Q. (By Mr. Maslowski) Moving here, the rate is  
19 2.25 percent, correct?

20 A. Yes.

21 Q. Now, let's look at some of the other  
22 agreements the parties have on products, such as  
23 Remicade and Humira, to see how reasonable your number  
24 is.

25 As part of determining your rate, you looked

1 at the parties' agreements, correct?

2 A. Yes.

3 [REDACTED]

4 [REDACTED]  
5 [REDACTED] **REDACTED BY ORDER OF THE COURT**

6 [REDACTED]

7 [REDACTED]

8 [REDACTED]

9 [REDACTED]

10 [REDACTED]

11 [REDACTED]

12 [REDACTED]

13 [REDACTED]

14 [REDACTED]

15 [REDACTED]

16 [REDACTED]

17 [REDACTED]

18 [REDACTED]

19 [REDACTED]

20 [REDACTED]

21 [REDACTED]

22 [REDACTED]

23 Q. And at the time of that agreement, the product  
24 was not launched. It was still in development, correct?

25 A. Correct.

1 Q. And so the product, obviously, wasn't  
2 successful. It wasn't even launched, correct?

3 A. Correct.

4 [REDACTED]  
5 [REDACTED] **REDACTED BY ORDER OF THE COURT**  
6 [REDACTED]

7 Q. Put a question mark there.

8 So we have two agreements. One is the  
9 hypothetical that you've come up with at a rate of 2.25.  
10 This is an actual agreement that the parties -- Abbott  
11 had related to Humira, correct?

12 A. Correct.

13 Q. This says the rate should go up; these all say  
14 the rate should go down.

15 [REDACTED]  
16 [REDACTED]  
17 [REDACTED]  
18 [REDACTED]  
19 [REDACTED]  
20 [REDACTED]  
21 [REDACTED]  
22 [REDACTED]  
23 [REDACTED]  
24 [REDACTED]  
25 [REDACTED]

1

**REDACTED BY ORDER OF THE COURT**

4 Q. Let's look at another agreement that you said  
5 was relevant.

6 It's your opinion that the most relevant  
7 agreement to the hypothetical negotiation is a  
8 Centocor/Abbott agreement of 2002, correct?

9 A. Correct.

10 Q. And the Abbott/Centocor deal in 2002 was a  
11 cross-license, correct?

12 A. It has a cross-license component, yes.

13 Q. Abbott got a license to the Kennedy patents?

14 A. Correct.

15 Q. Centocor got a license to the Salfeld patents,  
16 correct?

17 A. Correct.

18 Q. But the hypothetical negotiation you're  
19 looking at is not a -- it's not a cross-license, is it?

20 A. Correct.

21 Q. Abbott's not giving Centocor a license under  
22 anything in the hypothetical negotiation, correct?

23 A. Correct.

24 Q. So the jury's not being asked to determine  
25 what the royalty rate would be -- actually I should move

1 on from that.

2 Now, the question in a hypothetical  
3 negotiation, again, is how much Abbott would agree to  
4 pay for a license to Centocor's '775 patent, correct?

5 A. Correct.

6 Q. Now, even though Centocor -- the  
7 Centocor/Abbott agreement in 2002 was a cross-license,  
8 let's, nonetheless, look and see what Centocor received  
9 in value from Abbott's part of that transaction.

10 Now, Abbott pays -- as part of that deal,  
11 Abbott pays a 2 percent royalty, right?

12 A. Correct.

13 Q. And Centocor gets exactly zero of that  
14 royalty, correct?

15 A. Correct.

16 Q. It goes to the Kennedy Institute?

17 A. Correct.

18 Q. So the only thing that Centocor got, as part  
19 of the Centocor/Abbott sublicense or cross-license in  
20 2002 was the Salfeld patent license, correct?

21 A. Correct.

22 Q. And the Salfeld patent license covers Simponi,  
23 correct?

24 A. It covers whatever the cross-license states it  
25 covers.

1 Q. Do you recall testimony in here that Centocor  
2 needed the Salfeld patent license for Simponi?

3 A. I do recall that testimony.

4 Q. And you saw Dr. Gering testify the projections  
5 for Simponi were from \$1.9 billion in 2002 to \$5.6  
6 billion in early 2006, correct?

7 A. Yes.

8 Q. Now, you're also aware of Abbott valuing the  
9 Salfeld sublicense -- or the Salfeld license that  
10 Centocor got as part of that deal, correct?

11 A. No.

12 Q. Do you recall me asking you about some  
13 documents, about the value of the Salfeld patent license  
14 at your deposition?

15 A. Yes.

16 Q. Well, let's take a look at PX465. This is one  
17 of the documents that I asked you about at your  
18 deposition, correct?

19 A. Yes.

20 Q. It's an Abbott e-mail?

21 A. Yes.

22 Q. I'd like to look at the attachment.

23 MR. MASLOWSKI: If we can go to the last  
24 page. Next page. And if we can focus on the fifth and  
25 sixth bullet points. The -- actually, if we can just go

1 to the sixth bullet point. Just go to the sixth bullet  
2 point. We've seen this already.

3 Q. (By Mr. Maslowski) It says J&J failed to  
4 recall that they received, in exchange for a license to  
5 the Kennedy patent, a license to the Salfeld human TNF  
6 patent '382.

7 Did I read that correctly?

8 A. Yes.

9 Q. We, Abbott, have estimated that J&J derived  
10 \$1.6 billion in value. Net present value of margin for  
11 CNTO-148, which is Simponi, correct?

12 A. I disagree with that.

13 Q. You disagree that CNTO-148 is Simponi?

14 A. I disagree that Abbott said that. A  
15 particular person working at Abbott said that.

16 Q. Let me just ask the question again. Does the  
17 e-mail say, We -- and we're talking about Abbott,  
18 correct?

19 A. I don't think so.

20 Q. It's an Abbott document.

21 A. I know.

22 Q. And it says, We have estimated that J&J  
23 derived \$1.6 billion in value from the Salfeld human TNF  
24 patent.

25 Does the document say that? Yes or no.

1 A. Yes.

2 Q. And just to be clear, the Salfeld license was  
3 the only thing that Centocor got out of the  
4 Abbott/Centocor deal in 2002, correct?

5 A. Correct.

6 MR. MASLOWSKI: Joe, can you put up  
7 PX464, please.

8 Q. (By Mr. Maslowski) You've seen this document  
9 before, correct?

10 A. Yes.

11 Q. PX 464 is titled Biopharmaceutical Royalty  
12 Rates and Deal Terms Report, correct?

13 A. Yes.

14 Q. And it's from the Licensing Executives  
15 Society, correct?

16 A. Yes.

17 Q. You've heard of the LES, the Licensing  
18 Executive Society, correct?

19 A. Yes.

20 Q. This is not an Abbott study, correct?

21 A. Correct.

22 Q. It's not an Centocor study, correct?

23 A. Correct.

24 MR. MASLOWSKI: Can we go to Page 26 of  
25 the report, please.

1 Q. (By Mr. Maslowski) And the title of the slide  
2 is Fixed Royalties, Average Royalty by Stage of  
3 Development, correct?

4 A. Yes.

5 Q. And let's look at the three stages of  
6 development identified in the graph that is shown.

7 There are three stages, correct?

8 MR. MASLOWSKI: If we can highlight Group  
9 1, Group 2, and Group 5 there at the bottom.

10 Q. (By Mr. Maslowski) The first one is  
11 preclinical, correct?

12 A. Yes.

13 Q. That means the product's not launched?

14 A. That's my understanding.

15 Q. And the next one is pre-POC, and that means  
16 pre-proof-of-concept, correct?

17 A. Correct.

18 Q. That means the product's not launched?

19 A. Correct.

20 Q. And the last one says launched, and that means  
21 the product's launched, correct?

22 A. Correct.

23 Q. And so what we're looking at here are average  
24 royalty rates for each of these stages of development,  
25 from royalty -- actual royalty agreements from

1 pharmaceutical companies that LES studied correct?

2 A. Correct.

3 MR. MASLOWSKI: If we can just blow up  
4 the chart itself.

5 Q. (By Mr. Maslowski) And, Dr. Slottje, you told  
6 me Group 1 and Group 2 relate to products that are not  
7 launched, correct?

8 A. That's my understanding.

9 [REDACTED]

10 [REDACTED]

11 [REDACTED] **REDACTED BY ORDER OF THE COURT**

12 [REDACTED]

13 [REDACTED]

14 [REDACTED]

15 [REDACTED]

16 [REDACTED]

17 [REDACTED]

18 [REDACTED]

19 [REDACTED]

20 [REDACTED]

21 [REDACTED]

22 Q. Now, just to put us in context, again, we're  
23 not talking, in the hypothetical negotiation, about  
24 something going on in Group 1 or Group 2; we're talking  
25 about a hypothetical negotiation that relates to a

1 launched product, which is the last bar, correct?

2 A. I would agree with you, that we are talking  
3 about a launched product or a product very close to --  
4 yeah, it's a launched product.

5 Q. And the average royalty rate for  
6 pharmaceutical products shown in this study is -- for  
7 launched products is 11.6 percent, correct?

8 A. In that study, yes.

9 Q. Now, Dr. Slottje, you've worked on a lot of  
10 pharmaceutical cases, correct?

11 A. Yes.

12 Q. In fact, you've worked on dozens of them,  
13 correct?

14 A. Yes.

15 Q. In the dozens of pharmaceutical cases you've  
16 worked on, you've never given an opinion that the  
17 appropriate royalty rate for a launched product is 11.6  
18 percent, correct?

19 A. I've never given a study that was anywhere  
20 near that high, is what I told you.

21 Q. And in the dozens of pharmaceutical cases  
22 you've worked on, it's never been your opinion that the  
23 appropriate royalty rate was 4.6 percent, correct?

24 A. That's correct.

25 Q. And in the dozens of pharmaceutical cases

1 you've worked on, you've never even opined that the  
2 appropriate royalty rate is 4.3 percent, correct?

3 A. Correct.

4 Q. In fact, the highest royalty rate you've ever  
5 opined is correct is 2.25 percent, correct?

6 A. Yes.

7 Q. Dr. Slottje, I'd like to do a calculation with  
8 your help.

9 And I actually have a calculator here, if you  
10 want to check my numbers, but I want you to go to your  
11 Exhibit 10.1, if we can.

12 A. Okay.

13 Q. Are you there?

14 A. Yes.

15 Q. So instead of using the royalty rate that you  
16 think is appropriate, I'd like to do nothing other -- or  
17 I'd like to do nothing but change the royalty rate from  
18 2.25 percent to 11.6 percent.

19 We'll keep everything else in your lost  
20 profits analysis the same. The only thing we're going  
21 to do is change the royalty rate from 2.25 percent to  
22 11.6 percent.

23 Can you help me with that calculation?

24 So the first thing -- why don't we start with  
25 the royalties first.

1       A.     Have you already done it? Because I'll take  
2 your word for it.

3       Q.     Yeah. I just want to make sure that I did it  
4 correctly.

5       A.     Okay.

6       Q.     So the way I would do it, right, is to go to  
7 your royalty based number in the U.S.?

8       A.     Yes.

9       Q.     And that's 3.14 billion?

10      A.     Yes.

11      Q.     And I would add that to the royalty base for  
12 outside the United States, correct?

13      A.     Yes.

14      Q.     And I'd get to a number of a royalty base of  
15 about 7.25 billion, correct?

16      A.     Yes.

17      Q.     And that's the number we need to multiply by  
18 11.6 percent, correct?

19      A.     Yes.

20      Q.     And I did that calculation, and it came out to  
21 \$841 million.

22                  Does that sound about right?

23      A.     Yes.

24      Q.     And then we also still need to add that back  
25 to your lost profits number, which is \$124 million

1 correct?

2 A. Yes.

3 Q. And that gives us a total of \$965 million,

4 correct?

5 A. I'll take your word for it.

6 Q. So if the jury believes all of your opinions  
7 with respect to lost profits and decides that the  
8 appropriate royalty rate to use is just the average  
9 that's shown in this study for launched products, the  
10 damages that it should award to Centocor should be  
11 almost a billion dollars, correct?

12 A. That's the -- for the jury. And, of course --

13 MR. MASLOWSKI: If we can put up  
14 Dr. Gering's summary slide.

15 Q. (By Mr. Maslowski) And, of course, if the jury  
16 disregards your opinion entirely and follows  
17 Dr. Gering's analysis, then it should award  
18 approximately \$2.17 billion, correct?

19 A. That's, again, up to the jury.

20 Q. And Dr. Gering's analysis was based on his  
21 opinion that Humira and Remicade competed in  
22 rheumatology, gastroenterology, and dermatology,  
23 correct?

24 A. Correct.

25 Q. And, again, we haven't heard from any Abbott

1       witnesses on the subject of what products compete with  
2 other products, have we?

3           A. Well, you can -- you've heard from Abbott's  
4 documents.

5           Q. We did hear from Abbott's documents, didn't  
6 we, Dr. Slottje?

7           A. Yes.

8           Q. And there are three big binders of documents  
9 sitting next to you that we looked at as part of this  
10 analysis; isn't that correct?

11          A. Yes.

12          Q. And if the jury is to adopt your analysis, the  
13 jury, essentially, has to ignore the Abbott documents  
14 sitting in those binders; isn't that right, sir?

15          A. I disagree.

16                    MR. MASLOWSKI: Nothing further. I pass  
17 the witness.

18                    MR. BECK: May I move this, Your Honor?

19                    THE COURT: Unless she wants to use it.

20                    MR. BECK: Leave it where it is, Your  
21 Honor.

22                    THE COURT: Just had to say something,  
23 Mr. Beck? You hadn't said enough this morning?

24                    MS. WIGMORE: I think I'll take you up on  
25 your help, though.

1                   REDIRECT EXAMINATION

2       BY MS. WIGMORE:

3       Q.     Good morning, Professor Slottje.

4       A.     Good morning.

5       Q.     I think we'll start with the charts, though.

6 I can ask for Mr. Beck's help to get it out of the way.

7                   [REDACTED]

8                   [REDACTED]

9                   **[REDACTED BY ORDER OF THE COURT]**

10                  [REDACTED]

11                  [REDACTED]

12                  [REDACTED]

13       Q.     And what is the low end?

15       A.     .35 percent.

16       Q.     And you testified yesterday that the agreement  
17 that was most important in your analysis was the  
18 agreement between Abbott and Centocor.

19                  Do you recall that?

20       A.     Yes.

21       Q.     And if we walk through the charts here that  
22 Mr. Maslowski prepared, did that agreement involve a  
23 U.S. patent?

24       A.     Yes.

25       Q.     Did that agreement involve a competitor?

1 A. Yes.

2 Q. Did that agreement involve a product at the  
3 end of development?

4 A. Yes.

5 Q. Did that involve a product that was successful  
6 in clinical trials?

7 A. Yes.

8 Q. And did that product involve a Methotrexate  
9 combination with the TNF as a design-around in light of  
10 the label that Abbott was getting?

11 A. No.

12 Q. And what was the rate of that agreement?

13 A. 2 percent.

14 Q. And do you recall testifying about the  
15 cross-license from Abbott to Centocor?

16 A. Yes.

17 Q. That's the agreement that involves CNTO-148 or  
18 what we now know as Simponi?

19 A. Yes.

20 Q. Does that agreement -- and they provided  
21 testimony a few days ago and we saw the document here  
22 today about the value of that license to Centocor.

23 Do you recall that?

24 A. Yes.

25 Q. And what is the rate that Centocor pays in

1 that agreement, assuming that there's no benefit to  
2 Abbott from the Kennedy patent?

3 A. 2 percent.

4 Q. And what rate do both Abbott and Centocor pay  
5 to the Kennedy Institute for Humira and Remicade  
6 respectively?

7 A. 2 percent.

8 Q. And how do all of those agreements bear on  
9 your opinions concerning a reasonable royalty?

10 A. They're very important, because they're  
11 between the exact same parties over the same products.

12 [REDACTED]

13 [REDACTED] **REDACTED BY ORDER OF THE COURT**

14 A. They're very much more like the present  
15 situation.

16 Q. Now, do you recall Mr. Maslowski showing you  
17 some documents using the term competes or competitors?

18 A. Yes.

19 Q. If you assume that Remicade and Humira are  
20 competitors, are there other competitors in the  
21 rheumatology and dermatology market?

22 A. Yes.

23 Q. Does the lost profits analysis require you to  
24 allocate human -- Humira monotherapy sales among all of  
25 those competitors?

1 A. Yes.

2 Q. And were you able to do so to a reasonable  
3 degree of certainty for those therapeutic areas?

4 A. No.

5 Q. Why not?

6 A. Because as we talked about, even though  
7 they're all competitors in the biologic market, they're  
8 not competitors in a particular market segment. And the  
9 simplest example of that is he talked about  
10 gastroenterology and Crohn's disease.

11 Even though we know that Remicade and Enbrel  
12 are competitors in the biologic market, Enbrel can't  
13 even used for Crohn's disease -- I'm sorry -- can't be  
14 used under FDA approval for Crohn's disease.

15 So they're clearly not competitors in that  
16 particular market segment.

17 Q. And even within the RA and the dermatology  
18 segments, do you have to consider the differences when  
19 you allocate sales?

20 A. Yes.

21 Q. Now, do you recall being asked about your  
22 alternative calculations based on a different notice  
23 date?

24 A. Yes.

25 Q. And did you perform calculations assuming a

1 notice date of July 4th of 2006, as opposed to April  
2 16th of 2007?

3 A. Yes, I did.

4 Q. And I just want to walk through those briefly.

5 If you assume that it's the earlier notice  
6 date, by what amount would that increase your opinion  
7 concerning the lost profits award, if any, in this case?

8 A. The lost profits, if I -- you assume that it  
9 goes back to July, it would go up slightly.

10 Q. And if you -- and if you need to refresh  
11 yourself by looking at Exhibit 10.1 of your report, can  
12 you just tell us by how much it would go up if the  
13 notice date is July 4th of 2006?

14 A. If you took my number that was -- you may  
15 recall was \$209 million, if you included lost profits  
16 and reasonable royalties, and you took that back to July  
17 of 2006, that number would increase to \$246 million.

18 Q. And that's for the total lost profits and  
19 reasonable royalty?

20 A. Both of them, yes.

21 Q. And if you break it down, how much would the  
22 lost profits itself go up by if you use that notice  
23 date?

24 A. That I'll have to look up.

25 Q. And if you look at Section 10.1 that

1 Mr. Maslowski referred to.

2 A. That number would be -- what would lost  
3 profits go up? I'm sorry.

4 Q. Yes.

5 A. The total number would be \$124 million.

6 Q. And so what would the difference be between  
7 what you gave yesterday and the July 4th date?

8 A. It would be several million higher.

9 Q. Okay. And is the same true with respect to  
10 the reasonable royalty?

11 A. Yes.

12 Q. Now we've been talking about some big numbers  
13 here, Professor Slottje, and I want to make sure we're  
14 clear.

15 And you understand that Abbott's position is  
16 that it is not infringing the '775 patent and that the  
17 patent is invalid.

18 Do you understand that?

19 A. Yes.

20 Q. And if either one of those things is true,  
21 what amount of damages is appropriate?

22 A. Zero.

23 MS. WIGMORE: Thank you, Dr. Slottje.

24 MR. MASLOWSKI: Nothing further, Your  
25 Honor.

1                   THE COURT: Who's going to be the  
2 Defense's next witness? Y'all have any further  
3 witnesses?

4                   MR. BECK: No.

5                   MR. LEE: Your Honor, Abbott rests.

6                   THE COURT: You rest. Okay.

7                   Ladies and Gentlemen, there's a couple of  
8 matters the Court needs to take up. We'll take an early  
9 morning break, and we'll come back -- we've got some  
10 more testimony, but we're looking forward to my  
11 prediction being better than maybe what I did. I mean,  
12 in actuality, being better than what I predicted  
13 yesterday.

14                   So we'll take a morning break, and I'll  
15 take up some legal matters. Be ready to come back in  
16 the courtroom at 10:15, 10:15. You may leave the  
17 courtroom at this time.

18                   COURT SECURITY OFFICER: All rise.

19                   (Jury out.)

20                   THE COURT: Please be seated.

21                   Dr. Slottje, you testified in a series of  
22 cases over in front of Judge -- some cases in front of  
23 Judge Davis?

24                   THE WITNESS: Yes.

25                   THE COURT: What cases?

1                   THE WITNESS: I believe the Orion case.

2                   THE COURT: Well, you told this jury that  
3 no one had ever rejected any of your opinions. Are you  
4 saying the jury in the Orion case adopted your opinion?

5                   THE WITNESS: I'm sorry, Your Honor. I  
6 thought that was meaning it was -- I didn't take the  
7 question that way, Your Honor.

8                   THE COURT: Well, that was expressly the  
9 question. I was going to say, you might ought to review  
10 your testimony and the results next time before you  
11 appear before me, because I'm liable to talk to you in  
12 front of the jury about that.

13                  THE WITNESS: I'm sorry, Your Honor.

14                  THE COURT: All right. You're excused.

15                  THE WITNESS: Thank you.

16                  THE COURT: All right. We will take  
17 motions from the Plaintiff at this point.

18                  MS. ELDERKIN: Your Honor, Plaintiffs  
19 move for judgment as a matter of law on a number of  
20 issues, some of which I'll address rather quickly.

21                  There's no -- there has been no evidence  
22 that the patent-in-suit, the claims in suit, are  
23 obvious, so we would ask for judgment of  
24 non-obviousness.

25                  There's been no evidence that the

1 asserted claims are anticipated by the Le 1992 patent.

2 We would ask for judgment on that.

With respect to enablement and written description, the witnesses' testimony -- or all of the evidence from Dr. Marks yesterday was focused precisely on whether the 1994 application provided written description and enablement support, not the '775 patent.

8 So we would say that there is no evidence  
9 from which a reasonable jury can conclude that the  
10 issued patent does not meet those requirements, and we  
11 would ask for judgment on that.

12 We ask for judgment that the Salfeld 1996  
13 patent, which is in evidence, but about which no  
14 anticipation testimony was provided by Dr. Marks. We  
15 would ask for judgment that that does not anticipate.

16 The Salfeld patent -- there is evidence  
17 that the Salfeld patent discloses Humira. Abbott bears  
18 the burden to prove anticipation by clear and convincing  
19 evidence. Their witness has stated that Humira is  
20 not -- does not fall within our claims.

Abbott did not present any testimony that  
Salfeld 1996 anticipates, and we believe that this falls  
under the category of Your Honor's statement that there  
are not going to be any alternative opinions.

25 We believe what they're going to say is,

1 well -- they're going to argue, well, if you find that  
2 Humira infringes, then Salfeld 1996 anticipates.

3 We would ask for judgment on that.

4 Finally, the one I'd like to just talk  
5 about in a little bit more in detail is anticipation by  
6 Adair.

7 Adair is the patent that discloses the  
8 CDP571 antibody. There's been a lot of testimony about  
9 that.

10 And we have a number of reasons why we  
11 believe no juror could reason -- no reasonable juror  
12 could find anticipation, including that the competition  
13 tests are not credible, that the CDP antibody does not  
14 have an IgG1 constant region, as called for in the  
15 claims, but there is one point specifically that we'd  
16 like Your Honor to consider, and we can -- we've  
17 prepared a brief memorandum that we'd be happy to hand  
18 you a courtesy copy of.

19 THE COURT: Okay.

20 MS. ELDERKIN: You may recall from the  
21 testimony that one of the elements in every one of the  
22 four asserted claims is that the claimed antibody  
23 must -- must -- let me refresh my recollection now --  
24 oh, okay. The claimed antibody must bind to a  
25 neutralizing epitope of human TNF in vivo. That's

1 required in all of the claims.

2                   The only in vivo studies in the Adair  
3 patent of CDP571 were in a baboon.

4                   And Dr. Marks squarely admitted on his  
5 cross-examination, as stated in the -- our memo here,  
6 when he was asked: Did Adair 1992 report any testing of  
7 CDP571 in a human person for binding to human TNF-alpha  
8 in vivo in a human?

9                   ANSWER: No.

10                  QUESTION: Is there anything disclosed in  
11 the Adair reference, any tests, testing, neutralizing  
12 human TNF-alpha in vivo?

13                  He said: Yes, there are tests looking at  
14 neutralizing -- oh, they're not neutralizing human  
15 TNF-alpha in humans.

16                  So there is no evidence in the record on  
17 that element, and we would ask for judgment that the  
18 Adair reference does not anticipate the asserted claims.

19                  Thank you.

20                  THE COURT: Mr. Lee?

21                  MR. LEE: Your Honor, let me take the  
22 last first.

23                  While Dr. Marks gave that testimony on  
24 cross, at Exhibit -- the Adair reference, the 1992  
25 reference, which is in evidence, at Page 22 -- oh, I'm

1 sorry -- at Page 9, the reference itself says, quote,  
2 The recombinant antibody molecules of the invention are  
3 preferably TNF neutralizing, i.e. capable of recuing or  
4 inhibiting a biological activity of human anti-TNF-alpha  
5 as measured by an in vitro or an in vivo test.

6 At Page 22: The invention also provides  
7 methods of therapy and diagnosis comprising and  
8 administering an effective amount of recombinant or  
9 humanized antibody, according to the invention, to a  
10 human or animal subject.

11 So what you have, Your Honor, is, on  
12 direct, he testified that each and every element was  
13 present.

14 He testified that Dr. Adams did not  
15 dispute that there was any element missing, except  
16 competitive inhibition, and the Adair reference itself,  
17 which is in evidence, at Pages 9, 22, 24, and 25 answer  
18 the question that Ms. Elderkin has raised.

19 Now, to the extent there's inconsistency  
20 between what they elicited on cross and the exhibit,  
21 that's for the jury to decide.

22 But Adair, the only element that  
23 Dr. Adams identified as missing was competitive  
24 inhibition. That's the subject of the Veritas test.  
25 That is, like the other test, Your Honor, an issue for

1 the jury.

2 As to the Le reference, we heard, Your  
3 Honor -- the 1992 Le PCT application, we didn't offer  
4 any proof on that. I think that's resolved by Your  
5 Honor's rulings at the side-bar.

6 THE COURT: That's a result that there  
7 was no opinions offered in your expert report on that.  
8 That's why.

9 You know, I have not judicially estopped  
10 you from doing anything. I've done that -- I've made  
11 that clear, I thought.

12 MR. LEE: Right.

13 THE COURT: Because there was no opinion.

14 MR. LEE: Well, Your Honor, I -- at least  
15 as I -- maybe I can -- and I apologize if I'm having  
16 trouble picking this up.

17 We had tried to suggest, Your Honor, that  
18 we had the alternative opinions, and you said you're  
19 precluded from the alternative opinions, so we didn't  
20 offer them.

21 THE COURT: You were precluded from the  
22 alternative opinion because it was not included in the  
23 expert report that was disclosed in accordance with this  
24 rule.

25 MR. LEE: Well, Your Honor, and that is

1 where I'm confused. That -- this makes -- but we did  
2 disclose the alternative opinion in the expert report.  
3 I think I can show it to Your Honor, but it's --

4 THE COURT: Well, nobody has shown it to  
5 me up to this point.

6 MR. LEE: I think -- I think we cited it  
7 to Your Honor in our brief. But maybe -- I'll go on to  
8 the other issues and come back to it. Is that all  
9 right? Just -- just so that we're clear for the record  
10 on what happened to Le.

11 THE COURT: Well, I don't -- when you  
12 said it was an alternative opinion, I didn't think it  
13 was cited in the brief of the report, was it?

14 It wasn't -- it was just -- well, I  
15 didn't feel like it was sufficiently described in the  
16 report to be offered as an opinion.

17 MR. LEE: If I could get it, Your Honor,  
18 and then -- maybe I'll go to the other issues and come  
19 back to it. Is that okay?

20 Okay. So I -- we talked about Adair.

21 On obviousness, we have not asked Your  
22 Honor for any instructions on obviousness. The case is  
23 going to the jury as an anticipation case.

24 On this question of the Salfeld patent  
25 and the 1996 application, Your Honor's instructions have

1 the 1996 Salfeld patent as 102(e) and 102(b), prior art  
2 in both the patent and a publication.

3 THE COURT: As a publication.

4 MR. LEE: Yes. And one thing, Your  
5 Honor, that I think is -- should be clear is that when a  
6 party accuses you of infringing a patent by making a  
7 product, if the product or -- the product itself or a  
8 patent for a product or a publication is out there  
9 before, the -- you can't -- they can't have it both  
10 ways. You can't claim that the product infringes, and,  
11 by the way, it doesn't anticipate.

12 And the Federal Circuit has so held at  
13 least four times, but in Ocean Innovations, which is at  
14 2005 U.S. Appellate Lexis 17775; in Vanmoor, which is at  
15 201 Fed 3rd 1363; at Evans Cooling, which is at 125 Fed  
16 3rd 1448, in those three, the Court made just precisely  
17 that point.

18 If the product that you're accusing of  
19 infringing is on the market before then, either you're  
20 not infringing or it's invalid. You can't have it both  
21 ways.

22 So we have, as prior art in Your Honor's  
23 instructions, the Salfeld patent. The last claims the  
24 patent described D2E7, which is Humira, and the jury's  
25 entitled to consider that.

1                   And a verdict that would say the priority  
2 date is 2002 that the product infringes, but the patent  
3 is still valid would be an inconsistent verdict, and I  
4 think we're entitled -- we should be able to have the  
5 jury resolve that issue.

6                   So I think we've -- I've addressed all of  
7 the issues that Ms. Elderkin has raised.

8                   Can I just get a minute to --

9                   THE COURT: Well, I'm inclined to deny  
10 the motions, unless you need something else from me.

11                  MR. LEE: I don't.

12                  Do you -- Your Honor, on this Le thing,  
13 we're not going to -- it's not going to affect the  
14 evidence. Can I take a look, and then when we talk  
15 later, talk about it to the extent there's any --

16                  THE COURT: That will be fine.

17                  MR. LEE: Okay.

18                  THE COURT: Now, how long do you think we  
19 got on rebuttal?

20                  MS. ELDERKIN: We have a video clip that  
21 will be about 10 minutes, and then our direct of  
22 Dr. Adams may be 15 minutes.

23                  THE COURT: We're going to be through  
24 before noon?

25                  MS. ELDERKIN: Yes, Your Honor.

1                   THE COURT: Okay. Well, maybe they won't  
2 be too upset about having to come back Monday. They get  
3 the afternoon off.

4                   All right. We'll take that up...

5                   COURT SECURITY OFFICER: All rise.

6                   (Recess.)

7                   COURT SECURITY OFFICER: All rise.

8                   (Jury in.)

9                   THE COURT: Please be seated.

10                  All right. Who will be your first  
11 witness, Mr. Sayles?

12                  MR. SAYLES: May it please the Court.

13                  At this time, we would call Dr. Randall  
14 Kincaid. On this particular deposition -- and I don't  
15 believe he's present, so we're going to call him by  
16 deposition -- I'm going to do a bit of a more formal  
17 introduction, but it will only take a minute.

18                  This is the deposition of Randall  
19 Lawrence Kincaid, Washington, D.C., Thursday, April 2nd,  
20 2009.

21                  All right. Proceedings.

22                  The videographer at Page 6: The video  
23 deposition is being taken in accordance with the Federal  
24 Rules of Civil Procedure on April the 2nd, 2009, at  
25 approximately 10:16 a.m.

1                   Line 16: Will the attorneys present  
2 please identify themselves and who they represent.

3                   Mr. Pearson: Matthew Pearson, along with  
4 Diane Elderkin. We represent the Plaintiffs, Centocor  
5 and NYU.

6                   Mr. Oyole: Jacob Oyloe. I represent  
7 Abbott, as well as the witness.

8                   Ladies and Gentlemen, Dr. Kincaid  
9 received his undergraduate degree in biological sciences  
10 in 1972 from Stanford University and his Ph.D. in  
11 pharmacology in 1977 from Stanford University School of  
12 Medicine.

13                  Dr. Kincaid owns a company called Veritas  
14 that provides biotechnology consulting and services.

15                  Dr. Kincaid was hired by Abbott to  
16 perform competition testing of certain antibodies in  
17 this litigation.

18                  And, Your Honor, this runs 10 minutes,  
19 and we can charge it all to us.

20                  THE COURT: Okay.

21                  (Video playing.)

22                  QUESTION: What is Veritas?

23                  ANSWER: It is a company that is -- that  
24 provides biotechnology consulting and services and  
25 development of technology.

1                   QUESTION: How many staff members are  
2 there at Veritas?

3                   ANSWER: Currently, two.

4                   QUESTION: Who are they?

5                   ANSWER: Myself and my brother.

6                   QUESTION: Is your brother Barry Kincaid?

7                   ANSWER: He is.

8                   QUESTION: So Barry Kincaid, the other  
9 staff person at Veritas, can you tell me about his  
10 education, starting with college?

11                  ANSWER: To be honest, I don't know what  
12 his educational background is.

13                  QUESTION: Okay. When were you first  
14 contacted about this lawsuit?

15                  ANSWER: I believe it was last spring.

16                  QUESTION: Do you know what month?

17                  ANSWER: I would guess it would be in  
18 late April or early May, but I honestly don't recall.

19                  QUESTION: It was definitely in 2008, the  
20 year 2008?

21                  ANSWER: Yes.

22                  QUESTION: Who contacted you?

23                  ANSWER: I was contacted by Henry Wixon.

24                  QUESTION: Which assays did he ask you to  
25 carry out?

1                   ANSWER: The purification and antibodies,  
2 their characterization, growth of hybridomas, and assays  
3 involving ELISA.

4                   If you're asking about the initial  
5 discussions, it was a fairly broad discussion.

6                   QUESTION: So at some point, did Henry  
7 Wixon provide you with the protocols for you to carry  
8 out the things that you had put in your proposal?

9                   ANSWER: We obtained a general protocol  
10 for carrying out the initial evaluation of a so-called  
11 competitive ELISA. I believe that's one of the  
12 documents that you have in -- in your possession.

13                  QUESTION: So you received that protocol  
14 from Henry Wixon; is that right?

15                  ANSWER: Yes.

16                  QUESTION: What is a competitive ELISA?

17                  ANSWER: Well, competitive ELISA is used  
18 in many different ways, unfortunately.

19                  QUESTION: How was it used in this case?

20                  ANSWER: In this case, the term is used  
21 to indicate that an antibody can -- which can bind to a  
22 target, can be inhibited or displaced by another  
23 antibody in that well.

24                  And some have chosen to use the term  
25 competitive. Unfortunately, the literature has another

1 class of what is called competitive ELISA that is  
2 unrelated to this.

3 So it's a source of some confusion as a  
4 term, but because that was the name of the protocol that  
5 was given to us, that is how we referred to this.

6 QUESTION: The competitive ELISA assay  
7 that you were asked to do, is that something that you  
8 had done in your work at Veritas prior to this?

9 ANSWER: I don't recall having done this  
10 type of an ELISA. We have developed assays that are  
11 very close to this but not specifically this particular  
12 type of a stepwise procedure.

13 QUESTION: Do you recognize the name  
14 James Marks?

15 ANSWER: I cannot be certain. It may be  
16 the individual to whom I sent the CDP571, but I cannot  
17 be certain.

18 QUESTION: Is James Marks somebody that  
19 you have spoken to about this report?

20 ANSWER: About this report, no.

21 QUESTION: So to your knowledge, you  
22 haven't spoken to James Marks?

23 ANSWER: About this report?

24 QUESTION: Or about anything.

25 ANSWER: I am not certain that I spoke

1 with someone named James Marks. I do recall having  
2 spoken to somebody after having shipped CDP571.

3                   QUESTION: And so to your knowledge, you  
4 haven't spoken to James Marks about this report; is that  
5 correct?

6                   ANSWER: That's correct.

7                   QUESTION: You have not?

8                   ANSWER: About this report, that is  
9 correct.

10                  QUESTION: Were all of the competitive  
11 ELISA assays done by Barry Kincaid?

12                  ANSWER: Yes.

13                  QUESTION: And they were all done in this  
14 same procedure; is that right?

15                  ANSWER: Procedure --

16                  QUESTION: The same protocol was used?

17                  ANSWER: Yes.

18                  QUESTION: And the data was generated  
19 with the same instrument?

20                  ANSWER: Yes.

21                  QUESTION: And recorded in the same way?

22                  ANSWER: Yes.

23                  QUESTION: Did you observe him doing  
24 these experiments or is your --

25                  ANSWER: Yes.

1                   QUESTION: You observed him doing each of  
2 these experiments?

3                   ANSWER: In many cases, yes. I didn't  
4 look over his shoulder in each case.

5                   QUESTION: So for some, you saw him doing  
6 the experiment, and others, you're relying on the  
7 recording of the data in his notebook; is that right?

8                   ANSWER: Absolutely.

9                   QUESTION: So we talked about that you  
10 purify the antibodies, looked at them on SDS-PAGE Gels,  
11 tested them in a direct ELISA for binding the TNF; is  
12 that correct?

13                  ANSWER: Yes.

14                  QUESTION: Sometimes performed Western  
15 Blots; is that correct?

16                  ANSWER: Yes.

17                  QUESTION: But not always?

18                  ANSWER: Correct.

19                  QUESTION: And did the competitive ELISA  
20 experiments that we were just talking about that Barry  
21 Kincaid conducted; is that right?

22                  ANSWER: Yes.

23                  QUESTION: Does that cover all of the  
24 different experiments you did with the antibodies that  
25 you tested that are described in your report?

1                   ANSWER: I believe so.

2                   QUESTION: Did you ever measure the  
3 affinity of any of the antibodies for TNF-alpha?

4                   ANSWER: I didn't really have an  
5 effective assay, I believe, for that purpose.

6                   QUESTION: So you don't measure the  
7 affinity; is that right?

8                   ANSWER: I didn't have an assay, so I  
9 couldn't measure the affinity.

10                  The affinity descriptions, some of them  
11 that I've read, relied on a similar type of solid-phase  
12 assay, and I'm not comfortable using that as a  
13 measurement of affinity.

14                  QUESTION: Did you measure it any other  
15 way?

16                  ANSWER: No. I didn't have another  
17 method.

18                  QUESTION: Did you sequence the proteins  
19 that you had purified, amino acid sequencing?

20                  ANSWER: No.

21                  QUESTION: Did you ever sequence the  
22 genes that were producing the antibodies that would have  
23 been in the cells that you had received?

24                  ANSWER: You mean that I would have  
25 generated a nucleic acid sequence from genomic DNA and

1 then sequenced it?

2                   QUESTION: Yes.

3                   ANSWER: No.

4                   QUESTION: Did you ever test any of the  
5 antibodies in a neutralization assay; neutralizing the  
6 cytotoxic activity of TNF, for example?

7                   ANSWER: I was never asked to do any of  
8 those things.

9                   QUESTION: So if -- if I understand  
10 correctly, you haven't given conclusions in any part of  
11 your report about whether any two antibodies compete  
12 with each other for binding to TNF-alpha; is that  
13 correct?

14                  ANSWER: Compete, no, because it's not an  
15 appropriate assay, in my opinion, for competition.

16                  QUESTION: So sitting here today, you  
17 haven't formed an opinion as to whether any of these  
18 antibodies compete with each other for binding to  
19 TNF-alpha; is that right?

20                  ANSWER: I -- I believe I indicated that  
21 I don't believe this -- the collected data that I have  
22 lends itself to evaluating competitive binding.

23                  (End of video clip.)

24                  THE COURT: Is that the end of the  
25 deposition?

1                   MR. SAYLES: That concludes our proffer  
2 of it at this time.

3                   THE COURT: Okay. Does the Defendant  
4 have any proffer, another proffer?

5                   MR. LEE: Ask if we can offer the  
6 corrections to the transcript?

7                   MR. SAYLES: That's up to you.

8                   MR. LEE: Sure. I'll do it. Can I have  
9 it?

10                  MR. SAYLES: Yes.

11                  MR. LEE: I thought we worked that out.  
12 I'm sorry, Your Honor.

13                  MR. SAYLES: Well, I'll be glad to do it  
14 for you.

15                  MR. LEE: May I proceed, Your Honor?

16                  THE COURT: Yes.

17                  MR. LEE: Centocor and Abbott have agreed  
18 to Exhibit 861, which are the corrections that His Honor  
19 referred to yesterday that were made by the witness.  
20 And at Page 251, the --

21                  MR. SAYLES: Excuse me, Your Honor.

22 I'm sorry to interrupt you, Mr. Lee.

23                  Your Honor, I object to that. We didn't  
24 agree to the corrections. We agreed that Exhibit 861  
25 shows the corrections the witness made. We don't agree

1 to them.

2 MR. LEE: That's fair enough. We agreed  
3 that we would make this exhibit available to the jury --

4 THE COURT: Okay.

5 MR. LEE: -- okay?

6 And this will be available, but at  
7 Page 251, the clarify -- the reason for the errata,  
8 which is the name at the top of the page is,  
9 Clarification: Compete, no, because it's not an  
10 appropriate assay, in my opinion, for competition is  
11 changed to compete for the same epitope, no, because  
12 it's not an appropriate assay, in my opinion, for  
13 competition to the same epitope.

14 And two pages later, again, under  
15 clarification: Competitive binding is changed to  
16 competitive binding for the same epitope.

17 MR. SAYLES: May it please the Court.  
18 You can keep the clock --

19 THE COURT: That's number what?

20 MR. SAYLES: It's Plaintiffs' Exhibit  
21 861.

22 THE COURT: Okay. This one is 861?

23 MR. SAYLES: Yes, sir.

24 COURTROOM DEPUTY: It's not on the list.

25 THE COURT: All right. It's received.

1                   MR. SAYLES: Your Honor, just a few more  
2 items from this deposition.

3                   Page 2: Randall Lawrence Kincaid, the  
4 witness, was called for examination by counsel for the  
5 Plaintiffs pursuant to notice commencing at 10:16 a.m.  
6 at the law offices of Wilmer-Hale, 1875 Pennsylvania  
7 Avenue, Northwest Washington, D.C.

8                   Page 3: Appearances: Matthew Pearson  
9 and Diane Elderkin, Woodcock Washburn, Philadelphia,  
10 Pennsylvania.

11                  On behalf of the Defendants, Jacob Oyloe,  
12 Wilmer, Cutler, Pickering, Hale & Dorr, Washington, D.C.

13                  And then, Your Honor, if I may, I would  
14 like to publish a portion of 861 and just point out a  
15 few items.

16                  THE COURT: Okay. Of the exhibit?

17                  MR. SAYLES: Yes. I just want to read  
18 them.

19                  THE COURT: Read them. Okay.

20                  MR. SAYLES: Yes, sir.

21                  Plaintiff's 861 is a letter from the  
22 deposition service that recorded the deposition at which  
23 the attorneys appeared. It's dated April 30, 2009.  
24 It was sent to Woodcock Washburn on May the 5th --  
25 received by them on May 5th, 2009, relating to the

1 deposition of April the 2nd of Randall Kincaid.

2 It indicates the deposition transcript  
3 has been reviewed by the witness. Attached are the  
4 corrections/changes.

5 And then attached in the errata sheet,  
6 the reason for the change given that Mr. Lee read a  
7 moment ago -- I will not reread it -- is, quote,  
8 clarification, end quote, and that is true for each  
9 change that he read. Quote, clarification, end quote.  
10 It was signed before a Notary Public by Randall Kincaid  
11 on the 25th day of April, 2009.

12 The original deposition that concluded on  
13 April the 2nd, 2009, at 6:30 p.m. was also signed by  
14 Randall Kincaid and included in that transmittal.

15 That concludes our proffer of this  
16 deposition and Plaintiff's Exhibit 861.

17 THE COURT: Do you have another witness  
18 now?

19 MS. MULLIN: Yes. If it please the  
20 Court, the Plaintiff would call Dr. Adams.

21 THE COURT: Okay.

22 MR. BECK: Your Honor, was 861 admitted?

23 THE COURT: Yes.

24 MR. BECK: Thank you.

25 THE COURT: It's received into evidence.

1                   THE WITNESS: Do I need to be sworn?

2                   THE COURT: No. You're -- do you  
3 understand you're still under oath?

4                   THE WITNESS: Yes, I do. Thank you.

5                   THE COURT: Okay. Come around.

6                   MS. MULLIN: I'm sorry. I'm having some  
7 difficulty getting the ELMO to work. Oh, I've got it.

8                   GREGORY ADAMS, PLAINTIFFS' WITNESS, SWORN

9                   DIRECT EXAMINATION

10                  BY MS. MULLIN:

11                 Q. Good morning, Dr. Adams.

12                 A. Good morning.

13                 Q. Were you here in the courtroom when -- wrong  
14 way. Sorry.

15                 A. Okay. Right there.

16                 Q. There we go. Let's try that.

17                 Okay. When Mr. Lee asked Dr. Marks his  
18 opinions about various elements of the Adair 1992  
19 publication?

20                 A. Yes, I was.

21                 Q. And do you recall that then I went through  
22 some of the elements with Dr. Marks as well?

23                 A. Yes.

24                 Q. Okay. I'm going to ask you today to focus on  
25 one element, okay? And that's the competitively

1 inhibits one, okay?

2 A. Okay.

3 Q. So I'm going to ask you to focus on the  
4 competitively inhibits element, okay?

5 A. Okay.

6 Q. Okay. In your opinion, was the testing that  
7 Dr. Marks relied upon for this element reliable or  
8 conclusive on the issue of competition?

9 A. No.

10 Q. Why not?

11 A. Well, there were a number of reasons, and they  
12 relate to the antibodies that were used, the test  
13 protocols, and the data that resulted from the tests.

14 Q. Can we start first with the issue of the  
15 antibodies?

16 A. Yes.

17 Q. What's the -- what's the issue with that?

18 A. So Dr. Kincaid was testing a number of  
19 anti-TNF-alpha antibodies at the time. There were a  
20 number of antibodies in his laboratory.

21 And at one point, he was concerned that the  
22 antibody that he calls A2 -- or he actually says it  
23 behaves like a chimeric antibody. And we all know that  
24 the antibody A2 is a mouse antibody, so it shouldn't  
25 behave like a chimeric antibody.

1           And I know that he actually, after the fact,  
2 went back and said he was mistaken, but I -- I'm still  
3 concerned that that's not the antibody he thought it  
4 was.

5           Q.     Were there tests that could have been done in  
6 order to confirm that what he thought was A2 was  
7 actually A2 that he was using in his tests?

8           A.     Yes. Yes. He could have -- he could have  
9 tested the affinity for -- of the antibody he thought  
10 was A2 for TNF-alpha.

11                 He could have tested whether or not it  
12 neutralized TNF-alpha in the assays we've been talking  
13 about the last few days.

14                 He also could have sequenced the antibody to  
15 determine if it was, in fact, A2.

16           Q.     Have you also considered the protocol that was  
17 used in the testing done in Dr. Kincaid's laboratory?

18           A.     Yes. I have some serious concerns about the  
19 protocol.

20           Q.     Okay. So assume, though, that he did  
21 correctly identify the antibody A2, so what he was using  
22 was A2. Just assume that. Was the protocol he used  
23 appropriate for testing competition?

24           A.     So assuming that the antibody is correct, the  
25 protocol, first off, was provided to him by an attorney.

1 Not by a scientist, but by an attorney.

2                 The protocol calls for a modification of the  
3 antibody, to put a tag on it so you can trace it through  
4 the test, and that's fine. It calls for modifying it  
5 with something called biotin and under conditions that  
6 were so harsh that it damaged a significant majority of  
7 the antibody that was -- that he was using.

8                 Q. So is adding biotin something that should  
9 never be done for assays?

10                A. No, that's not what I'm saying. In fact, you  
11 can biotinylate -- it's a common practice to put biotin  
12 on an antibody as a tracer or a marker.

13                The problem is that you're obligated then to  
14 look at the biotin on the antibody and make sure it  
15 behaves the way it's supposed to behave. And there's  
16 tests that you can do to do that.

17                Q. Okay. If you could please turn, then, to  
18 what's been marked as Defendant's Exhibit 284.

19                MS. MULLIN: And maybe we can bring that  
20 up on the screen as well.

21                Q. (By Ms. Mullin) Do you recognize this,  
22 Dr. Adams?

23                A. Yes. This is a manual that's common in many  
24 antibody laboratories.

25                Q. Okay. If you could turn to Page 340 then.

1 MS. MULLIN: Maybe we can bring that up  
2 on the screen. And make it a little bigger. Thank you.

3 A. Okay.

4 Q. (By Ms. Mullin) What's being described here?

5 A. So this is the general use of biotin labeling  
6 of antibodies for assays, and it talks about how biotin  
7 is commercially available and that it's a sensitive  
8 detection method.

9 Q. So in short terms, it's telling you you can  
10 use biotin as a label, right?

11 A. Exactly. Just like I said, you can use biotin  
12 to measure what's happening with an antibody.

13 MS. MULLIN: Can we turn then to the next  
14 page, Page 341? Just down to about No. 3 or so. There  
15 we go.

16 Q. (By Ms. Mullin) What else does the Harlow  
17 manual tell you about using biotin in assays?

18 A. So it talks to you about -- you put biotin --  
19 when you're putting biotin on an antibody, you often put  
20 it on lysings.

21 And what it tells you is that -- if you go  
22 down toward the end of the first paragraph --  
23 biotinylation with the succinimide ester will lower or  
24 destroy the activity of the protein and other -- if it  
25 does, other methods of labeling should be tried.

1           And it also --

2       Q.    I'm sorry. I just want to make sure -- I  
3 think you misspoke.

4           It's an if sentence, not an absolute sentence,  
5 right?

6       A.    Yes. I'm sorry. If --

7       Q.    That's okay.

8       A.    If a free amino acid group forms a portion of  
9 the protein that is essential for activity. I missed  
10 reading that part.

11           So if the biotin is coming on a part of the  
12 antibody when the antibody interacts with the target  
13 antigen, the protein, TNF-alpha in this case, it will  
14 damage the antibody such that it cannot function, and  
15 you should, therefore, try a different tag instead of  
16 biotin, is what this is saying.

17           And then at the bottom here in, Paragraph No.  
18 3 -- I think it's labeled No. 3 -- they actually talk  
19 about a wide range of biotin that should be tried with  
20 the antibody.

21           So you try it under a different range of  
22 conditions, and then you test it to see if it's  
23 functional to make sure that you're using the right  
24 amount of Biotin for the antibodies so that you can  
25 trace it without damaging it.

1 Q. Speak very slowly.

2 A. I'm sorry.

3 Q. In your opinion, are the competition tests  
4 that Dr. Marks referred to in his testimony that used  
5 biotin labeled A2 reliable?

6 A. No, they're not reliable. They -- yeah.

7 They're not.

8 Q. Now --

9 MS. MULLIN: You can take that off the  
10 screen.

11 Q. (By Ms. Mullin) One of the other antibodies  
12 that was used in the testing Dr. Kincaid indicated was  
13 CDP571, right?

14 A. That's correct.

15 Q. Was that labeled with biotin?

16 A. No. That was not biotin labeled.

17 Q. So that antibody was fine.

18 A. That -- it should have been fine, yes.

19 Q. Okay. Well, if you can turn to DX450.

20 MS. MULLIN: Do you have that and can you  
21 bring that up on the screen? That's Defendant's Exhibit  
22 450. And if you could blow up the top portion.

23 Q. (By Ms. Mullin) Now, you said the antibody  
24 should be fine in terms of not having a biotin label,  
25 but what does this indicate about the antibody sample

1 that Dr. Kincaid indicated was CDP571?

2 A. Okay. So this is the example that Dr. Kincaid  
3 says he tested, and the real key here is that this is a  
4 very, very old antibody. It was made -- it says right  
5 up there -- on the 2nd of March, 1993, and then it says  
6 an expiration date of September 2nd, 1994.

7 So the certificate of analysis that, in fact,  
8 my understanding is, was provided to Dr. Kincaid by the  
9 attorneys, it didn't come with the antibody when he  
10 received it from shipment. This was provided separately  
11 from the antibody.

12 The certificate of analysis says the antibody  
13 had expired back in 1994, more than 14 years before he  
14 tested this antibody.

15 Q. Why does that matter, or why could it matter?

16 A. It can matter, because there's a lot of things  
17 that can happen to an antibody over long-term storage.  
18 It can be degraded, which means it can be chewed up.  
19 Pieces can come off.

20 It can aggregate. It can clump. And if an  
21 antibody aggregates or clumps, it's going to behave  
22 differently in these competitive binding assays than it  
23 would if it was a pure single antibody.

24 Q. Did Dr. Kincaid's laboratory do any testing to  
25 see whether there was any degrading or aggregating of

1 the sample?

2 A. They tested to see if there was any degrading  
3 of the antibody, and they showed, in fact, that there  
4 was no degrading of the antibody. The antibody had not  
5 degraded over the 14 years.

6 But when they test -- actually, they didn't  
7 test for aggregation. They just tested for degrading.  
8 So there was no testing for aggregation.

9 Q. So how do we know whether aggregation would  
10 have affected the data that was generated?

11 A. We don't know. Aggregation, if effective --  
12 once again, it would make the antibody bigger, and it  
13 would be more likely to compete. And we don't know if  
14 it aggregated or not, and they could have tested for  
15 that.

16 Q. So setting aside what you said about the  
17 antibodies used in the testing and what you said about  
18 the procedure now, if you could assume that the data  
19 generated from the test was reliable, do you agree with  
20 Dr. Marks' conclusion about what the results show?

21 A. No, I do not.

22 Q. Why?

23 A. Well, there were two sets of tests that were  
24 done.

25 The first set of tests Dr. Kincaid performed

1 with the antibody he's calling A2 that was biotinylated  
2 showed no competition between A2 and the CDP571  
3 antibody. There was none.

4 So he went back and modified the conditions of  
5 the assay a little bit and performed the test again.

6 Q. And when he performed the test again, did it  
7 affect -- well, what parts -- what did he modify in  
8 particular?

9 A. So he -- he did a couple of things. He  
10 changed the concentration of the -- but the key thing  
11 is, he knew -- he used a new preparation of biotinylated  
12 A2. And so that was a good first step.

13 But when he -- when you look at the quality of  
14 the biotinylated A2 that he used in the second assay,  
15 there's still -- a significant majority of the  
16 biotinylated A2 is damaged and unable to function.

17 Q. So is there any indication at all in the  
18 second competition assay with the modified procedure  
19 that would support Dr. Marks' opinion that there's  
20 competition?

21 A. There are a couple of points that definitely  
22 suggest competition in the second assay, yes.

23 Q. So then wouldn't you conclude from those that  
24 there is competition in the assay?

25 A. No. Because at those points in the assay, at

1 the points where the assay suggests competition, the  
2 control antibody that was used in the assay was giving  
3 results that suggest to me that the assay was unreliable  
4 at that point.

5           We put control antibodies in assays because we  
6 know how the control antibody should behave in an assay.  
7 If the control antibody is not behaving the way it's  
8 supposed to behave in the assay, the assay is  
9 unreliable, and you cannot base any conclusions on those  
10 results.

11          Q. Dr. Adams, in your normal job  
12 responsibilities, do you have experience reviewing other  
13 scientists' work?

14          A. Yes, I do.

15          Q. In what context?

16          A. So I think I mentioned before, I'm a reviewer  
17 for dozens of scientific journals. I'm a grant reviewer  
18 for the National Cancer Institute, for the Department of  
19 Defense. I've been a reviewer for the American Cancer  
20 Society, to name others.

21           I supervise students, technicians, post docs,  
22 and other scientists in my laboratory.

23          Q. So if you were reviewing the same information,  
24 the same data in one of those capacities, what would you  
25 do?

1       A. I would reject it. If it was my student, I  
2 would send them back to the bench and tell him to do it  
3 again right.

4           If it was for publication in a journal, I  
5 would reject the publication, because it's unreliable.

6       Q. So to summarize, what is your opinion about  
7 the competitive ELISA assays performed in Dr. Kincaid's  
8 laboratory with respect to the reliability of the method  
9 and data generated?

10      A. It's unreliable.

11      Q. So then what is your opinion about whether  
12 Adair 1992 anticipates the asserted claims of the '775  
13 patent?

14      A. In my opinion, it does not anticipate.

15      Q. Thank you.

16           MS. MULLIN: Pass the witness, Your  
17 Honor.

18           THE COURT: Take the slide down first.  
19 Take the slide down first. Ask this operator over here.  
20 Now, there we go. Now see if you can't do it now.  
21 There we go.

22           MR. LEE: We'll try to do it the  
23 old-fashioned way.

24           THE COURT: Okay. You've got the ELMO.

25           MR. LEE: All right. May I proceed, Your

1 Honor?

2 THE COURT: Please do.

3 CROSS-EXAMINATION

4 BY MR. LEE:

5 Q. Good morning, Dr. Adams.

6 A. Good morning.

7 Q. You sat here during Dr. Marks' testimony on  
8 all of the invalidity issues, correct?

9 A. That is correct.

10 Q. And I asked you -- when I cross-examined you  
11 earlier, you were testifying about infringement,  
12 correct?

13 A. That is correct.

14 Q. And now you're here to talk about validity,  
15 correct?

16 A. That is my understanding.

17 Q. And the only issue that you've given an  
18 opinion on is Adair and anticipation, correct?

19 A. That is correct.

20 Q. And that's the limit of your opinions for this  
21 trial, correct?

22 A. In the testimony I've given this morning, yes.

23 Q. Right. Now, you and Dr. Marks disagree on the  
24 importance of the Veritas test, correct?

25 A. That is correct.

1 Q. But you have known Dr. Marks for many years,  
2 have you not?

3 A. Yes, I have.

4 Q. You know him as one of the real pioneers in  
5 the field of phage display, correct?

6 A. He is a pioneer in phage display, and he's  
7 a long-term collaborator of mine.

8 Q. Right.

9 A. Yes.

10 Q. In fact, your relationship goes all the way  
11 back to 1994 of import here on in this case?

12 A. If not before actually.

13 Q. And in 1994, you wanted to learn about phage  
14 display, so you asked Dr. Marks if you could come to his  
15 laboratory and study under him, correct?

16 A. That is correct.

17 Q. And he said sure, come and study under me,  
18 correct?

19 A. He's a friend, yes.

20 Q. Yes. He's a good friend and a good colleague,  
21 correct?

22 A. That is correct.

23 Q. For whom you have enormous respect?

24 A. I think we respect each other, yes.

25 Q. Now, let's go to the only invalidity opinion

1 you brought, and that's about the Adair 1992 reference.

2                   Do you have that in mind?

3           A. Yes, I do.

4           Q. Now, for reference to anticipate the, it has  
5 to have each and every limitation of the claim, correct?

6           A. That is correct.

7           Q. And you sat there while Dr. Marks went through  
8 the different elements of Claim 2, Claim 3, Claim 14,  
9 and Claim 15, correct?

10          A. Right.

11          Q. You gave a report in this case, correct?

12          A. That is correct.

13          Q. You addressed Adair specifically, correct?

14          A. That is correct.

15          Q. And you only identified one limitation, of all  
16 of them, on which you and Dr. Marks disagree, correct?

17          A. I believe you're correct. I -- I -- I think  
18 so. I mean, it was focusing on competition.

19          Q. Right.

20          A. Is what we focused on, yes.

21          Q. But Dr. Marks submitted a report that says  
22 Adair has all of the elements of the claim, correct?

23          A. I think you're correct.

24          Q. And then you responded, and you say, well, I  
25 disagree on one, and it's the competitive inhibition

1 limitation, correct?

2 A. Correct.

3 Q. Now, you just told the Ladies and Gentlemen of  
4 the jury that one of the tests run by Veritas actually  
5 had some data points that showed competition, correct?

6 A. There were two data points, correct.

7 Q. Now, let's be sure the jury understands how  
8 these tests came apart -- about.

9 You know from the opening that February 1994  
10 is an important date, correct?

11 A. Correct.

12 Q. And if you want to have something that's prior  
13 art, you need to go back before February of 1994 for  
14 that purpose, correct?

15 A. That is my understanding, yes.

16 Q. So you know that what happened is Abbott went  
17 and found a sample of this antibody, CDP571, that  
18 actually was in existence before 1994, correct?

19 A. That's what I was told, yes.

20 Q. And it got a sample, and what it did with it  
21 is, it gave half of it -- or a portion to Veritas and  
22 the other half to you, correct?

23 A. I don't know.

24 Q. You don't know that Centocor was given half of  
25 the sample?

1       A. I don't know that that was that -- that  
2 sample.

3       Q. Okay. But you know that you got a portion of  
4 CDP571, correct?

5       A. Of CDP571 from before 1994?

6       Q. Yes.

7       A. No, I don't know that.

8       Q. Did you know that Centocor -- withdrawn.

9               When we received the sample copy from  
10 Celltech -- that's where it came from, correct?

11      A. That's correct.

12      Q. Did you know that Centocor asked for a portion  
13 of the sample?

14      A. Yes.

15      Q. You knew that it was available to you for  
16 testing, correct?

17      A. I didn't know it was available to me  
18 personally for testing, but it was available -- the  
19 sample that was sent was available to Centocor for  
20 testing, yes.

21      Q. Right. And where is that sample today?

22      A. I have it.

23      Q. Right. Setting in your refrigerator, isn't  
24 it?

25      A. No. Actually, I have it with me here today.

1 Q. Okay. And tell the Ladies and Gentlemen of  
2 the jury, when did you receive the sample?

3 A. It would have been late last year.

4 Probably -- I think it was December, but I'm not  
5 certain. It was somewhere in that timeframe.

6 Q. Now, Dr. Adams, when you saw the Veritas  
7 tests -- you saw them, correct?

8 A. That's correct.

9 Q. You saw Dr. Marks' analysis of them, correct?

10 A. That's correct.

11 Q. You saw the data points you've described that  
12 showed some competition, correct?

13 A. Correct.

14 Q. You said, well, what I would like to have is a  
15 third test that would show me whether that, in fact, was  
16 competition, correct?

17 A. That's correct.

18 Q. And having given that opinion, you left the  
19 sample that was given to you by us untested, correct?

20 A. That's correct.

21 Q. Now, you understand from the opening that --  
22 and even from the examination this morning, that  
23 Centocor is seeking \$2.2 billion in damages, correct?

24 A. Correct.

25 Q. It would have cost about \$10,000 to do the

1 test, which would have enabled you to confirm whether  
2 Dr. Marks' analysis was correct, right?

3 A. Correct.

4 Q. You didn't do it, correct?

5 A. Correct.

6 Q. Because you weren't asked to do it?

7 A. That's correct.

8 MR. LEE: Nothing further, Your Honor.

9 MS. MULLIN: A few questions, Your Honor?

10 THE COURT: Yes.

11 MS. MULLIN: -- if I may?

12 REDIRECT EXAMINATION

13 BY MS. MULLIN:

14 Q. Dr. Adams, Mr. Lee just asked you some  
15 questions about a sample that you received.

16 Can you describe your understanding of how the  
17 sample that you have relates to Dr. Kincaid's testing?

18 A. I would be happy to.

19 So the sample -- Dr. Kincaid received a sample  
20 from Celltech, which is correct in the -- but he also  
21 received a certificate of analysis talking about an  
22 antibody that was produced in 1993 and expired in 1994.  
23 And we saw that on the screen.

24 The tube that Dr. Kincaid tested and then sent  
25 on to me personally that I have in my possession says

1 nothing about 1993 or 1994. It says October, I think,  
2 it's 20th or something, 2008 on it. Not 1994, not 1993.  
3 The sample also says that CDP571P, which is a different  
4 designation than the designation on the certificate of  
5 analysis. I don't know what the P means in CDP571P.  
6 It might mean that it's modified. It might mean that  
7 it's a different subset that's been produced many years  
8 later.

9                   The date 2008 on the sample adds to that level  
10 of concern, so I don't know what he tested.

11               Q. So what information do we have, if any, that  
12 suggests that whatever was -- whatever was tested by  
13 Veritas Lab, that they thought was CDP571 actually has  
14 any relationship to some compound, CDP571, that might  
15 have existed back in 1992 or '93 or '94?

16               A. None.

17                   MS. MULLIN: Nothing further, Your Honor.

18                   THE COURT: All right.

19                   MR. LEE: Just a couple, Your Honor.

20                   REDIRECT EXAMINATION

21                   BY MR. LEE:

22               Q. Dr. Adams, the sample came from Celltech,  
23 correct?

24               A. It says that on the label, yes.

25               Q. Celltech was a creator of CDP571, correct?

1 A. That is correct.

2 Q. Celltech took the license from Adair under the  
3 Adair patent, correct?

4 A. That is my understanding.

5 Q. And the sample was dated before February 1994,  
6 correct?

7 A. No. The sample is dated 2008.

8 Q. No. Actually, I'm going to come to that.  
9 The 2008 date is the date on which the sample was  
10 shipped to us by Celltech as a result of discovery in  
11 this case, wasn't it?

12 A. That is the date it was shipped, yes.

13 MR. LEE: Nothing further, Your Honor.

14 THE COURT: Anything further?

15 MS. MULLIN: Permission to mark the  
16 sample and offer it into evidence, Your Honor?

17 THE COURT: Any objection?

18 MR. LEE: May we approach, Your Honor?

19 THE COURT: Okay.

20 (Bench conference.)

21 MR. LEE: This is a sample that's not  
22 premarked or preadmitted. It wasn't tested.

23 And what good is that going to be for the  
24 jury?

25 THE COURT: Well, we'll let them see what

1 y'all have been talking about, because I don't know.

2 MR. LEE: Well, I haven't seen it, so  
3 could we at least see it since it's --

4 THE COURT: Well, sure.

5 MS. MULLIN: Should I -- I'd like to --  
6 should I mark it, and can the witness put it on the ELMO  
7 and show it to the jury?

8 THE COURT: No. First thing you do is  
9 mark it.

10 MS. MULLIN: Okay.

11 THE COURT: And give it to Mr. Lee, and  
12 then if he has any objection.

13 So get the sample and let's mark it.

14 MS. MULLIN: Okay. Thank you, Your  
15 Honor.

16 (End of bench conference.)

17 THE COURT: Do you have a label there?

18 COURTROOM DEPUTY: She's got it.

19 THE COURT: Somebody has an exhibit  
20 label.

21 THE WITNESS: It's in bubble wrapping,  
22 because I didn't want it to break in my pocket.  
23 I can take it out.

24 THE COURT: Yes, take it out.

25 (Sample marked.)

THE WITNESS: She will give it to you.

MS. MULLIN: Thank you.

MR. LEE: May we approach, Your Honor?

THE COURT: Yes.

(Bench conference.)

MR. LEE: Your Honor, there was -- for the sample that we had tested, if you recall, there was an authenticating declaration to deal with the authentication issues.

10 We didn't offer that, because all we were  
11 offering was the test sample, if we were going to offer  
12 anything at all.

With that in mind -- and this was not on  
the list before Judge Everingham. Judge Everingham said  
that he was excluding the authenticating declaration for  
our portion of the sample.

17 If this is going to go in, which we  
18 haven't gotten notice of before. This is the first time  
19 we've heard that they were going to offer this.

20 Then the authenticating declaration for  
21 our sample, we would ask go in as well.

THE COURT: The declaration you said?

23 MR. LEE: Yes. It's a declaration under  
24 802.

25 MS. MULLIN: Your Honor, there's a lot of

1 information about that correction. If I may explain the  
2 circumstances, Your Honor.

3 The sample was subpoenaed during the  
4 course of discovery, along with -- along not only with a  
5 request for the sample but also a notice of deposition  
6 that they could authenticate the sample.

7 Abbott chose not to take the deposition  
8 during discovery. After discovery was over, about a  
9 week later, we got a declaration from somebody in  
10 England, who purported to describe the circumstances  
11 under which the sample had been stored, that the  
12 practices -- it was not contemporaneously with the  
13 sending of the sample, so it's not contemporaneous  
14 authentication.

15 THE COURT: I'm not going to allow the  
16 authentication as a declaration.

17 Your expert has testified that the  
18 information he -- he relied on that information. And it  
19 would be self-serving. I'm not going to allow -- I'm  
20 going to allow him to see the sample.

21 I mean, y'all all testified about what it  
22 said or didn't say. Your man testified that he relied  
23 on it; he says it's not reliable. I'm going to -- I'm  
24 going to -- your objection is overruled.

25 I am allowing -- and I'm sustaining your

1 objection to the declaration. I don't see that that's  
2 an issue at this point.

3 MR. LEE: Okay.

4 MS. MULLIN: Thank you, Your Honor.

5 THE COURT: Do you have any further  
6 objection?

7 MR. LEE: No.

8 MS. MULLIN: Can I have permission to  
9 have him hand this to the jury?

10 THE COURT: Pardon?

11 MS. MULLIN: Can he hand this to the  
12 jury, the vial?

13 THE COURT: Just offer it into evidence  
14 and request to publish it.

15 MS. MULLIN: Okay. Thank you.

16 (End of bench conference.)

17 MS. MULLIN: At this time, Your Honor, Plaintiffs offer  
18 Plaintiffs' Exhibit 862 into evidence.

19 THE COURT: The Court will --

20 MR. LEE: No objection, Your Honor.

21 THE COURT: Yeah, I will admit it over  
22 the objection of the Defendant.

23 MS. MULLIN: All right. May we publish  
24 it to the jury, Your Honor?

25 THE COURT: Yes.

1 Q. (By Ms. Mullin) And, Dr. Adams, since you've  
2 had a little more time to look at it, where does the  
3 designation CDP571 appear on the -- 571P -- excuse me --  
4 appear on the vial?

5 A. If I recall correctly, it's the lot number.  
6 It's just below and to the right of the lot number,  
7 which is a separate sticky, and the P is right after  
8 CDP571.

9 MS. MULLIN: Thank you, Your Honor.  
10 Nothing further.

11 THE COURT: Anything further?

12 MR. LEE: Nothing further.

13 THE COURT: All right. You may step  
14 down, Doctor.

15 THE WITNESS: Thank you.

16 THE COURT: Plaintiffs have anything  
17 further?

18 MR. SAYLES: May it please the Court.  
19 At this time, the Plaintiff rests its rebuttal case.

20 THE COURT: Close?

21 MR. SAYLES: Plaintiff closes.

22 THE COURT: Defendant?

23 MR. BECK: Your Honor, we may have one  
24 matter we need to talk with the Court about before -- we  
25 have no further witnesses.

1                   THE COURT: All right. Is this a lengthy  
2 discussion?

3                   MR. BECK: No, sir.

4                   THE COURT: Okay. Come up here.

5                   MR. BECK: It's for guidance from the  
6 Court.

7 (Bench conference.)

8                   MR. LEE: I just want an answer to the  
9 question they left hanging about whether we had  
10 identified the portion of the --

11                  MR. BECK: Expert's report.

12                  MR. LEE: -- expert's report that had the  
13 contingent opinions. And this is a copy of our brief,  
14 Your Honor, on the judicial estoppel motion, which  
15 refers to '184. This is a copy of the report.

16 And I apologize. It's my confusion, but I had thought  
17 that we had let Your Honor know that we had these  
18 contingent opinions, the if opinions, as you might --

19                  THE COURT: Yes. But I'm saying the if  
20 never existed. The condition for those to come  
21 admissible never existed. I excluded that.

22                  MR. LEE: Right.

23                  THE COURT: And I have precluded them  
24 from doing anything that would establish that.

25                  MR. LEE: Yes.

1                   MR. BECK: Let me just be blunt about  
2 what the concern is. You've clearly made a ruling. The  
3 question we've been struggling with is, do we make a  
4 proffer of evidence; and if we do, does the Court wish  
5 us to do it now or do that later?

6                   THE COURT: It's not necessary.

7                   MR. BECK: We don't want to slow the  
8 process down.

9                   THE COURT: I'm just trying to get the  
10 jury out of here.

11                  MR. BECK: Right, right.

12                  THE COURT: No. I'll exclude for the  
13 reasons I've previously stated as clearly as I could.  
14 But that's what I tried to tell y'all yesterday. I'm  
15 going to let you take whatever time you need to make any  
16 proffer to protect the record.

17                  MR. BECK: That's all we need.

18                  MR. LEE: That's all we need.

19                  THE COURT: I'm not trying to sandbag  
20 you. That's what he does to me.

21                  MR. BECK: No.

22                  THE COURT: I learned that from him.

23                  MR. LEE: I'm the one who was confused  
24 about that.

25                  MR. BECK: I said, look, we've got to

1 approach the judge and tell him what we're going to do.

2 THE COURT: I learned it from him. I'll  
3 tell you some stories about what he does to people on  
4 the other side.

5 MR. LEE: Thank you.

6 (End of bench conference.)

7 THE COURT: All right. Does the  
8 Defendant have anything further?

9 MR. LEE: No, Your Honor.

10 THE COURT: Defendant close?

11 MR. LEE: Defendant closes.

12 THE COURT: All right. It's not 3:30,  
13 but the Court has got several legal matters I've got to  
14 take up, and I've got to get the Court's Charge  
15 prepared.

16 I might could get it ready by 3:30 and we could keep you  
17 here tonight, but I don't think -- I think what we'll do  
18 is what we've talked about doing. And that is break  
19 now, let me release you till Monday morning at 8:30, at  
20 which time we will take -- we will have the closing  
21 arguments of the parties.

22 That's going to take as much as an hour and a half a  
23 side, and it will take about 45 minutes for me to read  
24 the Charge, based on what I believe it's going to look  
25 like. Then you will start deliberating somewhere then.

1 I guess that's pretty close. A little after 11:00;  
2 we'll probably take one break in there. So before lunch  
3 anyway.

4 What I want to discuss and let you be thinking about,  
5 your deliberations -- you'll be allowed to deliberate,  
6 you know, as long as the Court thinks, which could spill  
7 over into Tuesday.

8 What I wanted you to think about, and y'all decide among  
9 yourselves, if you're not able to reach a verdict by  
10 about 5:30 or so on Monday, the Court will be willing to  
11 stay with you into the evening, if you thought you could  
12 reach a verdict.

13 But at the same time, if somebody's tired and wants to  
14 go home, y'all need to think about that before you come  
15 back as to how long you want to stay on Monday.

16 I've got permission from Mrs. Ward to -- I can stay as  
17 long as I need to, because it's my job. If it was  
18 something else, I might have to have special permission.  
19 So y'all be thinking about that.

20 But you don't need to make up -- don't be making up your  
21 mind in this case of who you think ought to win or lose  
22 this case, because you have not yet heard their  
23 argument.

24 The Court likes to think that -- and I will tell you  
25 that probably the most important function of the Court

1 is the final charge that I give you after argument. And  
2 you should not be making up your mind until you've heard  
3 what I'm going to tell you about what the law is, who  
4 has the burden of proof on certain issues, and those  
5 kinds of things, because it could make a substantial  
6 difference from time -- I like to think that what I do  
7 on the law has something to do with the outcome.

8 So please don't make up your mind and keep an open mind  
9 till the end of the case. And then when you go to  
10 deliberate, that will be the time to start discussing  
11 it.

12 Don't let anybody discuss it with you. Don't do any  
13 research. Don't get on the internet. Don't read any  
14 newspapers papers. Don't listen to any news stories.  
15 And should anyone contact you about this case, you  
16 should immediately report it to the Court.

17 I tell you, I don't anticipate that happening. I've  
18 been doing this for 42 years almost, and I've never had  
19 that happen with 30 years as a judge and as a lawyer,  
20 and I don't think it will happen in this case. But I  
21 caution -- I always caution jurors, because that's part  
22 of my job.

23 So I don't mean to indicate to you that I think it will  
24 happen, just the opposite.

25 So with that final instruction, have a nice weekend,

1 drive safely, and stay out of the heat. No heat  
2 strokes, okay?

3 See you Monday morning.

6 | (Jury recessed.)

THE COURT: I misspoke. An hour and a half total, not an hour and a half per side.

9 | Don't get excited, Mr. Sayles. Just calm down.

10 MR. SAYLES: I was going to lay low.

11 THE COURT: Yeah, lay low.

12 All right. The Court -- be seated.

13 All right. Have you got -- have you given somebody --

LAW CLERK: They have it.

15 THE COURT: With the change in the  
16 verdict form?

17 | LAW CLERK: Yes, sir.

18 THE COURT: It's dangerous, I guess, for  
19 the Court to sleep overnight, because I made some  
20 changes I said I probably wasn't going to make on the  
21 verdict form, and I didn't make as much of a change as  
22 might have indicated that I was going to make in the  
23 Charge itself.

24 I felt like the change to the verdict form -- but what I  
25 thought, since we're all here, about 11:45, if you want

1 to, we can have a final -- we'll have one more informal  
2 jury conference. And if you can convince me in there  
3 that I need to make a change, I will listen to you.  
4 Then we'll come -- if you like, we'll work a little bit  
5 past 12:00 and go ahead and get the final objections so  
6 you can make your plans to do whatever you're going to  
7 do in the meantime.

8 But a couple of things when we're in chambers, we'll  
9 talk about the times for jury arguments as far as what  
10 the Court -- about dividing.

11 Now then, can we do the -- at 12:00, when we come back  
12 at 11:45, or do you want to make your proffer now?

13 MR. LEE: We can do it then. I think I  
14 have to renew our JMOL, and I can make the proffer at  
15 that time, okay?

16 THE COURT: Okay. Does that work with  
17 everybody?

18 MS. ELDERKIN: Yes, Your Honor.

19 THE COURT: Well, maybe you think -- why  
20 don't we get together in chambers at 11:30 with the  
21 changes. I didn't do much -- I changed some things, but  
22 I'm sure that the heartburn level is still a certain --  
23 same where it was.

24 (Recess.)

25 (Jury out.)

1                   COURT SECURITY OFFICER: All rise.

2                   THE COURT: Please be seated.

3                   Okay. We'll have some motions from the  
4 Plaintiff.

5                   MS. ELDERKIN: Your Honor, Plaintiff  
6 renews its motion for judgment as a matter of law on  
7 obviousness and anticipation by early 1992; enablement,  
8 written description, anticipation by Salfeld '96; and  
9 anticipation by Adair incorporating, by reference, the  
10 arguments I made earlier.

11                  Thank you.

12                  THE COURT: And of course, I'm not  
13 submitting obviousness, but I'm going to deny those  
14 JMOLs. They may be one and the same. I never have  
15 convinced myself.

16                  Mr. Lee for the Defendant.

17                  MR. LEE: Your Honor, we would renew our  
18 JMOL motions on infringement, willful infringement, and  
19 damages, which Your Honor has previously considered.

20                  We would move JMOL for anticipation.

21 Actually, let me back up.

22                  We move for JMOL for invalidity for three  
23 different reasons.

24                  One for written description, particularly  
25 because the evidence is closed. There was no testimony

1 from Dr. Adams on the written description issue at all.

2                   On enablement, we have the same situation  
3 where there is no testimony from Dr. Adams or any other  
4 witness at all.

5                   And then on Adair, we would move JMOL on  
6 the basis that there's no real dispute as to the  
7 claims -- whether Adair satisfies each and every element  
8 of the claims.

9                   And then lastly, I would renew the motion  
10 on notice that Your Honor has previously denied.

11                  THE COURT: Okay. All right. The  
12 motions are denied.

13                  Now we need to take up proffer of  
14 evidence?

15                  MR. LEE: The only proffer is this, Your  
16 Honor: I think I've got it now. We would proffer  
17 the -- as follows: We would have had Dr. Adams testify  
18 to that which is indicated in his expert report at 184,  
19 which is, if Le 1992 were enabled, he would have  
20 testified that it would have satisfied each and every  
21 limitation of the claims.

22                  THE COURT: I exclude that because I gave  
23 you the benefit of a ruling that did not allow him to  
24 testify that way. So the if was never a condition that  
25 ever existed.

1 MR. LEE: Thank you, Your Honor.

2 THE COURT: Do you have anything, Ms. --

3 MS. ELDERKIN: No, Your Honor. Thank  
4 you.

5 THE COURT: All right. We'll take  
6 objections to the charge and the verdict form from the  
7 Plaintiffs.

8 MS. ELDERKIN: No objections, Your Honor.

9 THE COURT: Okay. From the Defendant?

10 MR. LEE: Your Honor, the only -- just  
11 two things.

12 Our objection to the charge, the verdict  
13 form at Page 6 and the introduction to Questions 5 and  
14 6. We believe it would be most appropriate to have them  
15 answer only if the claims were found to be valid and  
16 infringed.

17 THE COURT: Well, I just -- that's-- you  
18 know, in the new verdict form, we grouped them. You  
19 want -- we numbered -- these numbers were changed.

20 Here. He may have not have seen this.  
21 Just get the number right.

22 MR. LEE: So it would be Page 4, Your  
23 Honor. The introduction to Questions 3 and 4, we  
24 believe should be answered if the jury answered yes to  
25 both questions -- if it found the claims were both

1 infringed and invalid.

2                   And the only other thing we have, Your  
3 Honor, is just to renew the contentions we made during  
4 the Markman process, to preserve them, given Your  
5 Honor's charge on the claims.

6                   THE COURT: Well, I believe I'll stay  
7 with my original Markman ruling. I probably -- I have  
8 some better understanding now than I did, but I'll stay  
9 with what I got. Thank you.

10                  Anything further?

11                  MR. LEE: Nothing further Your Honor.

12                  THE COURT: Anything further you need  
13 from the Plaintiff?

14                  MS. ELDERKIN: No, Your Honor.

15                  THE COURT: Defendant, do you have  
16 anything further at all?

17                  MR. LEE: Nothing, Your Honor.

18                  THE COURT: Mr. Beck, you've said very  
19 little this morning.

20                  MR. BECK: It's always Monday, Your  
21 Honor.

22                  THE COURT: Okay. I'll see y'all Monday  
23 at -- have you got -- have y'all got an agreement, as  
24 far as exchanging exhibits for -- if you're going to use  
25 any additional demonstratives during closing arguments,

1 or have y'all got that worked out?

2 MS. ELDERKIN: Judge, we don't have an  
3 agreement. I'm sure we can come to one.

4 MR. BECK: Yeah. Your Honor, I think we  
5 will have some additional demonstratives, I suspect they  
6 will, and we'll work together as we have before the  
7 trial.

8 THE COURT: Well, I'll be here at 8:00  
9 o'clock on Monday morning to work out any final  
10 problems.

11 The Court -- you know, anything that is  
12 in evidence, you don't need to work out an agreement.  
13 It's in evidence. You can refer to anything that's in  
14 evidence.

15 Demonstratives that have been used  
16 without an objection, they can be referred to. If  
17 you've got new demonstrative exhibits, that's what you  
18 need to make sure you've conferred on, and I'll be here,  
19 as I said, at 8:00.

20 MR. BECK: Judge, just two quick  
21 questions.

22 Since you'll be giving them the charge  
23 after the opening statement, does the Court have any  
24 objections if we put up on the screen --

25 THE COURT: No.

1                   MR. BECK: -- what we anticipate the  
2 Court will ask?

3                   THE COURT: You don't even have to -- you  
4 don't even have to be that careful. You can just say  
5 the Court is going -- has furnished us with a copy of  
6 his remarks.

7                   MR. BECK: And the second thing -- I  
8 don't remember -- does the Court give them a physical  
9 copy of the charge to take back?

10                  THE COURT: No.

11                  MR. BECK: I didn't think so.

12                  THE COURT: I give them -- the only thing  
13 I give them are the questions, all right?

14                  All right. I'll see you -- well, I guess  
15 I'll see several of you tomorrow and all of you Monday.

16                  COURT SECURITY OFFICER: All rise.

17                  (Court adjourned.)

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5 CERTIFICATION  
6

7 I HEREBY CERTIFY that the foregoing is a  
8 true and correct transcript from the stenographic notes  
9 of the proceedings in the above-entitled matter to the  
10 best of my ability.

11

12

13

14 /s/ \_\_\_\_\_  
15 SUSAN SIMMONS, CSR  
Official Court Reporter  
State of Texas No.: 267  
16 Expiration Date: 12/31/10

\_\_\_\_\_ Date

17

18

19 /s/ \_\_\_\_\_  
20 JUDITH WERLINGER, CSR  
Deputy Official Court Reporter  
State of Texas No.: 731  
21 Expiration Date 12/31/10

\_\_\_\_\_ Date

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